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South Asia in Quest for Peace & Health

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&
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South Asia in Quest for Peace & Health

A Joint Publication by

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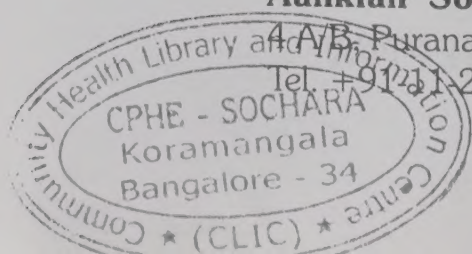
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PREFACE

South Asia consists of India, Pakistan, Bangladesh, Nepal, Bhutan, Sri Lanka and Maldives. Maldives is the smallest nation with a population of about 200,000 and is a peaceful country with no problems. All the other 6 countries have some problem. Bhutan with a population of about 800,000 under a king had recently taken Army action against insurgents from India who had camped there. Bhutan has per capita income almost twice that of India. Bangladesh is teaming with population problem and has camps of terrorists as alleged by India. Nepal has problem with Maoists group. Sri Lanka has a prolonged and serious problem with LTTE. What religion and nationalism have divided, health can unite “South Asia is fast emerging as the poorest, the most illiterate, the most malnourished, the least gender-sensitive –indeed, the most deprived region in the world. Yet it continues to make more investment in arms than in the health and education of its people!” Mahbub ul Haq, former Pakistan Minister of Finance and Planning.

South Asia has some of the worst health indicators in the whole of Asia and the world. Almost 40% of the total global burden of mortality in children under 5 years occurs in its four largest countries. About 70% of the world's low birth weight infants are in South Asia. Major inequities exist in the provision of health care and public service. The region has also experienced virtually continuous conflict and disorder; all of this against the backdrop of developments in many fields, some of questionable value. India leads most of the world in information technology but together with Pakistan allocates a major portion of its budget to nuclear weapons and sophisticated missile delivery systems. Nuclear war has been narrowly averted on several occasions. Such misplaced priorities for investment lie at the heart of the South Asia Paradox. Developments in technology and industrialization have failed to bridge the urban-rural divide or lessen poverty, and social and gender inequalities”. ‘British Medical Journal South Asia Edition Vol.19 No11 Jan. 2004’.

The major problem is between Pakistan and India especially since

they have become nuclear powers. Recently there is thaw and it is a welcome step.

There should be coordination between South Asian countries as proposed in recent SAARC (South Asia Association of Regional Cooperation) meeting in Pakistan.

The Development index of all the seven countries can change dramatically if we spend less on defense and adopt peaceful means for resolving difference. It must be realized that a Nuclear War is “No Win War”. It means only devastation of all those who are involved. The nuclear weapons must be destroyed and the conventional wars avoided. The region should rise to the challenges of eradicating poverty, ill health, and social inequalities. Kerala in India, Sri Lanka as a whole and rural development programmes in Bangladesh involving women are some of the shining examples. The book “South Asia in Quest for Peace and Health” is an attempt to put forward these views to general public.

— ***Dr. L.S. Chawla***

INTRODUCTION

As young medical students, doctors are trained to provide relief and succor to the sick and infirm. It becomes a second nature for them to help bring about directed changes to improve our living conditions and comfort levels and to eliminate the causes of disease. The Hippocratic oath “I will prevent disease whenever I can, for prevention is preferable to cure. I will remember that I remain a member of society, with special obligations to all my fellow human beings, those sound of mind and body as well as the infirm” acts a guiding star during the course of their professional activities and provides the ethical and human dimension to their acts. Increasing commercialization in medical education and healthcare are trying to lure some doctors away from what they have vouched for, but a majority has stood this onslaught on our fundamental principles. Medical professionals all over the world have not shied from taking a bigger perspective and have raised their voice on social concerns, often going beyond their immediate goals. They have demanded a ban on tobacco smoking and helped push legislation to publish statutory warnings on cigarette packages and regulate smoking in public places. They have come forward to demand a ban on sex determination tests that are being misused as nefarious instruments of female foeticide.

Doctors have tried to bring about awareness about various illnesses occurring as a result of consuming unclean water, air pollution and environmental degradation. Medical professionals have also mobilized opinion about the danger to the health of people in the event of war and violence. Doctors from South Asia have not lagged behind on this issue even in the face of misdirected and jingoistic euphoria following the nuclear explosions by India and Pakistan in recent years.

Gandhiji once described the essence of freedom as “wiping every tear from every eye.” Even after 50 years of freedom, the percentage of those suffering hardship in South Asia is higher than in any other region of the world. South Asia accounts for nearly 1/5th of

the world's population, 2/3rd of its absolute poor and 1/2 of its illiterate adults. This region has emerged as the most illiterate, the most malnourished, the least gender sensitive and indeed, the most deprived region in the world. About 40% of population earns less than \$1 per day, 25% have no access to safe drinking water, and almost half of the children are underweight. South Asia's annual per capita income is less than even that of sub-Saharan Africa. Added to this during the last 50 years, its population has almost tripled. Some of the common priorities in the countries of South Asia are: clean drinking water for over 200 million people, poverty eradication for over 400 million people, sanitation facilities for over 600 million and education and health care facilities for all. The sheer magnitude of the problems is staggering. It requires equitable distribution of prosperity in addition to rapid economic development.

There are immense possibilities but these are being marred by many a reason including the festering relations between India and Pakistan, the consequent tensions and expenditure on the arms race, persistent internal ethnic problems in different countries of the region. All these problems have been made worse by global imperialist interventions. But despite all this there are unlimited possibilities of a peaceful, non violent and nuclear weapon free developed South Asia as people of these countries, India, Pakistan, Bangladesh, Nepal, Sri Lanka, Bhutan and Maldives have many common social, economic, psychological and spiritual tenets including those derived from Islam, Buddhism, Hinduism and Christianity and a number of other beliefs.

This publication attempts to provide the perspective of doctors as concerned citizens. It attempts to provide specific insights to deal with some of the problems that we face today. These include among other aspects, the threat posed by fascist communalism, galloping expenditure on the arms race, the myth of nuclear deterrence and the inherent possibilities for social peace and harmony- a necessary condition for a better human life. The SAARC summit has raised high hopes in the minds of peoples. This efforts must be continued in right direction and implemented in right spirit.

- Dr Arun Mitra

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DOCTORS DUTY BOUND TO PREVENT NUCLEAR CATASTROPHE

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DOCTORS AND THE INDIAN PEACE MOVEMENT

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Foreword

DOCTORS DUTY BOUND TO PREVENT NUCLEAR CATASTROPHE

War is one of the most serious threats to public health. It has catastrophic effects on civilian infrastructure and the environment, and accounts for more deaths and disability than many major diseases combined. It destroys families, communities, and sometimes whole cultures. It channels limited resources away from health and other social needs. Health professionals have a duty of care to prevent war and its consequences on health.

The incidence of war has been rising since 1950. Major root causes include political, economic and social inequalities, as well as ethnic and religious differences. Many of the world's poorest countries are suffering, or have recently suffered, from large scale deadly wars which carry heavy human, economic and social costs, perpetuating the spiral of poverty and under-development. To reduce the likelihood of wars, it is essential to advocate disarmament, promote inclusive development, and reduce inequalities between groups.

Since 1945, nuclear weapons have threatened to fragment and destroy the fabric of civilisation. Physicians soon recognised the genocidal and ecocidal possibilities of nuclear war when the Cold War doctrine of nuclear deterrence evolved and threatened 'mutual assured destruction.' International Physicians for the Prevention of Nuclear War (IPPNW) was founded in 1980, inspired and led by two remarkably visionary and courageous physicians, Bernard Lown of the United States of America and Evgeni Chazov of the then Soviet Union.

The philosophy of IPPNW was derived from a simple principle of public health and preventive medicine - to prevent nuclear war, nuclear weapons had to be eliminated. A global campaign to abolish nuclear weapons was launched, using the tools of research, education and advocacy. This

important work was recognised by the award of a Nobel Peace Prize in 1985.

At the IPPNW Stockholm congress in 1991, after the end of the Cold War, Bernard Lown realised that the bipolar world had come to an end, to be replaced by a unipolar but more complex and disorderly world that required a more holistic approach to disarmament and conflict prevention. The mission of IPPNW was enlarged to include the prevention of all wars, the promotion of non-violent conflict resolution, and the mitigation of the effects of war and preparations for war on health, development and the environment.

The end of the Cold War in 1989 presented the international community with a 'window of opportunity' to forsake nuclear deterrence and militarism and choose to return to a moral and rational world free of nuclear weapons. But the opportunity was spurned and the promise of nuclear disarmament, embodied in the Nuclear Non-Proliferation Treaty, was set aside.

The 1996 Canberra Commission on the Elimination of Nuclear Weapons expressed a self-evident truth when it argued that the possession of nuclear weapons by any state would stimulate others to acquire them, reducing the security of all. This axiom of proliferation was proved correct, when India and Pakistan decided to exercise their nuclear options, one after the other, by developing nuclear weapons and carrying out nuclear tests in 1998, transforming South Asia into a nuclear tinder-box. The Cold War's fear of a global nuclear holocaust has now given way to the fearful possibility of a regional nuclear catastrophe in South Asia.

Supporters of nuclear weapons in South Asia may feel encouraged to believe that during the Cold War nuclear deterrence prevented a 'hot' war between the United States and the Soviet Union, but they need to be reminded that it was through sheer luck that the 1962 Cuban missile crisis did not escalate into a nuclear holocaust.

The prospect of such an escalation in a military conflict between India and Pakistan is real. There are some pro-nuclearists and anti-nuclearists in both countries who believe that a nuclear exchange in the future is inevitable. A majority in India supported India's nuclear option, arguing that

the danger of nuclear war is so small that it is negligible. Yet another group in both countries believe that the possibility of nuclear war is not inevitable or negligible, but that it will depend essentially on the intensity of any future Indo-Pakistani conflict. Physicians in India and Pakistan have a heavy responsibility to educate and create public awareness about the realities of nuclear war in South Asia and the squandering of limited resources to sustain a nuclear deterrent.

Engraved on Mahatma Gandhi's ashram in New Delhi are the words: *Recall the face of the poorest and most helpless man whom you may have seen and ask yourself if the step you contemplate is going to be of any use to him. Will he be able to gain anything by it? Will it restore him to a control over his own life and destiny? In other words, will it lead to swaraj (or self-rule) for the hungry and also spiritually starved millions of our countrymen.*

The cataclysmic terrorist attacks on New York and Washington on 11th September 2001 carried the stark message that war and violence were not the prerogative of nation states alone and that all states are vulnerable to terrorist attacks, even when they have armed themselves with nuclear weapons. The US "war on terror," its new nuclear war-fighting policies, and its willingness to exercise unilateral, pre-emptive military strikes make for endless conflict. At present, no individual or nation is safe from indiscriminate violence in a highly militarised world, awash with a variety of conventional and unconventional weapons. The irony is that, given certain conditions, any of these weapons could fall into the hands of terrorists.

It is in the context of this changing, uncertain world that all governments should be persuaded to redefine security in non-military terms, seek to prevent war, and make an unequivocal commitment to eliminate nuclear weapons and other weapons of mass destruction. Physicians in nuclear weapon states in particular are burdened with the responsibility to bring about this change.

— **Dr Ronald McCoy**

*President,
International Physicians for the Prevention of Nuclear War*

Foreword

IPPNW PRINCIPLES OF ACTION

The Board of Directors of International Physicians for Prevention of Nuclear War (IPPNW) recently drafted a set of principles, in a statement which begins:

IPPNW is a global federation of organizations comprising physicians and other health workers dedicated primarily to the prevention of nuclear war through the elimination of nuclear weapons and the military strategies that foster their development and use. To that end, IPPNW seeks to understand and counter the causes of conflict and violence within and between human groups, and to proclaim their consequences for human health.

That statement confronts IPPNW with a potentially enormous agenda of research, education and advocacy, one which encompasses tensions and conflicts in every corner of the world. Clearly each individual member, each affiliate and the international federation as a whole must be selective and focused, husbanding energies to work on particular issues and in particular geographical settings,

Part of our focus stems from the recognition that our expertise and reputation begins with the professional status of physicians, and medical commitment to the health of our patients. We know that the promotion and maintenance of health requires more than effective work in the clinic and hospital; it calls for a recognition of the root causes of ill-health and action to redress them.

The most fundamental causes of ill-health lie close to the fundamental causes of conflict and war: economic, environmental and social injustice. Populations confronted by such injustice make desperate efforts to improve their lot, sometimes employing violence or being subject to violent reaction from the powers that seek to control them. As a result, poverty is increased,

epidemic and famine emerge, health services are disrupted.

The worst risk of sudden damage to human health lies in the threat of use of nuclear weapons, and the Indian subcontinent is a region where that risk looms large. Physicians who accept a responsibility for national and community health have a moral obligation to spell out the realities of the terrible effects of nuclear attack on a city, and to study and seek to counter the prejudices and fears and tensions which feed the threat that such weapons might be used. That is the advocacy for which IPPNW received the Nobel Prize for Peace in 1985.

In the face of the nuclear threat, the opportunity for physicians to come together with a common message, joining across the divides of race and language and politics will never come easily, and common advocacy by physicians from opposite sides of a hostile regional confrontation may expose them to criticism and even danger. But it is the tradition of IPPNW to seek common ground and establish such links, and the Board is heartened by the example of colleagues in India and across South Asia for the ways they have seized that opportunity and spoken out strongly and fearlessly.

This volume, bringing together analysis and comment from a wide range of intellectual and professional sources is an earnest of Indian medical commitment. The Board of IPPNW congratulates IDPD and its supporting network of activists across the subcontinent on a splendid initiative.

— Professor Ian Maddocks

Chairman, on behalf of the Board of Directors, IPPNW

Foreword

PREVENTING NUCLEAR WAR IN SOUTH ASIA: THE IPPNW PERSPECTIVE

In October 1998, a few short months after India shook the foundations of the nuclear non-proliferation regime by unexpectedly conducting a series of nuclear test explosions, only to be followed in quick succession by Pakistan, International Physicians for the Prevention of Nuclear War (IPPNW) published a special report on the South Asian nuclear crisis in its journal, *Medicine & Global Survival*. As the nuclear rivalry between India and Pakistan became more intense, with both countries declaring themselves nuclear weapon states and proceeding to rattle their atomic sabres across hotly disputed Kashmir, IPPNW's leaders came to realize that the most immediate danger of nuclear war now resided in the new arsenals and the familiar sounding nuclear war fighting policies being developed by two neighbors with a tragic history of violent conflict.

With some 30,000 nuclear warheads between them, the US and Russia remain the only nuclear states capable of destroying the rest of the world along with themselves, many times over. Nevertheless, in the post-Cold War political environment such a disaster is unlikely except as the result of a catastrophic accident or miscalculation. As the 21st century opened, however, India and Pakistan were increasingly echoing the 20th century superpowers in every important respect: embracing doctrines of nuclear deterrence, engaging in the insane rhetoric of mutual nuclear threats, committing large percentages of already scarce national treasure to the development of warheads and delivery systems, at the expense of food, shelter, health care, education, and employment for their people.

Worst of all, the political and military leaders in both countries appear to have fallen victim to the seductive illusion from which the US, Russia, and the other nuclear weapons states have yet

to free themselves: that nuclear arsenals somehow make them more secure, and that they can “manage” their nuclear competition “responsibly.” India has declared policies of “minimum” deterrence and no first use of nuclear weapons, though Pakistan has declined to reciprocate. Both countries have sought to improve command and control infrastructures and early warning systems, brushing aside the deadly potential for such systems to amplify errors in human judgment when decisions must be made in less than five minutes from a suspected missile attack.

The October 1998 special issue of *M&GS* contained an excerpt from a study by Princeton University physicist M. V. Ramana (then at MIT) that would later be published in full by IPPNW. Ramana estimated that a 15-kiloton nuclear explosion over Bombay – approximately the size of the Hiroshima bomb – could kill more than 800,000 people [1]. Subsequent research by Ramana and others has confirmed that an exchange of Hiroshima-sized bombs targeted against the five largest cities of each country would leave 2.9 million people dead, not to mention hundreds of thousands of survivors with blast and burn injuries for which there could be no medical treatment [2]. US intelligence agencies have placed the likely death toll from a nuclear war between India and Pakistan at 12 million people or more.

These statistics reflect neither the devastation to the entire region that would inevitably result from a nuclear war [3], nor the long term medical effects of exposure to radioactive fallout, including cancers, birth defects, and intergenerational genetic damage [4,5].

By most accounts, politicians, military leaders, the media, and much of the public in India and Pakistan are inadequately informed about the medical and environmental consequences of nuclear war. They seem to believe that a nuclear weapon is merely a bigger, more powerful regular bomb. Whenever IPPNW physicians have conducted medical conferences and workshops on the effects of nuclear weapons, often showing photos of what happened in Hiroshima and Nagasaki at the end of World War

II, their audiences have been shocked into an awareness of the true nature of these weapons and have left the lecture halls demanding nuclear disarmament.

Not so long ago, the government of India showed a greater awareness of the nature of nuclear weapons, not only demanding their global elimination – a policy that, in all fairness, it continues to support today – but also condemning the possession, use, and threatened use of nuclear weapons and the justifications for possession offered by the United States and the other nuclear weapon states. Reflecting its own best traditions of non-violence in the pursuit of security and social justice, India submitted a compelling brief to the International Court of Justice (ICJ) in June 1995, during the Court’s deliberations on whether nuclear weapons were illegal under international law [6].

“[Even] where a wrongful act [of force by another State] involved the use of a nuclear weapon the reprisal action cannot involve use of a nuclear weapon without violating certain fundamental principles of humanitarian law. In this sense, prohibition of the use of a nuclear weapon in an armed conflict is an absolute one, compliance with which is not dependent on corresponding compliance by others but is a requisite in all circumstances.

“...[A] nuclear response to a nuclear attack would violate the principle of discrimination, humanity, environmental security and probably the principle of neutrality as such an attack would not distinguish between combatants and non-combatants, causing civilian casualties, ravaging the natural environment, and contaminating the territory of neighboring and distant neutral countries. Nuclear deterrence had been considered to be abhorrent to human sentiment since it implies that a state, if required to defend its own existence, will act with pitiless disregard for the consequences of its own and adversary’s people.”

Recognizing that nuclear proliferation could be the only outcome in a world where the existing nuclear weapon states refused to disarm, India nevertheless argued eloquently before the Court that any country choosing to ac-

quire a nuclear arsenal would be violating fundamental legal and moral principles:

“Since the production and manufacture of nuclear weapons can only be with the objective of their use, it must follow that if the use of such weapons itself is illegal under international law, then their production and manufacture cannot *under any circumstances* [emphasis added] be considered as permitted.

“...The production of weapons which have the capacity to destroy all mankind cannot in any manner be considered to be justified or permitted under international law.”

The ICJ, when it published its advisory opinion in July 1996 [7], reiterated nearly every one of India's arguments. On one point, India was willing to go even further than the Court. While the justices felt they could not rule on whether international law would preclude the use of nuclear weapons in a case where the very survival of a state was at stake, India had suggested that even national survival was no justification for international genocide.

When the UN General Assembly held follow-up sessions to the Court's advisory opinion in September 1999, India, which in the meantime had tested nuclear weapons and had declared itself a nuclear weapon state, submitted a new set of policies for the record while declaring itself a consistent and determined advocate of global nuclear disarmament, a new government had adopted a muted posture with regard to its own nuclear capabilities, grounded more in strategic and political considerations than in morality or international humanitarian law [8].

“Conscious of its responsibilities as a nuclear-weapon State, India has unequivocally and unconditionally stated through a unilateral commitment that it will not be the first to use nuclear weapons and that it remains willing to strengthen this undertaking by entering into bilateral agreements on a no-first-use of nuclear weapons or multilateral negotiations on a global no-first-use of nuclear weapons.”

Moreover, the government told the General Assembly that India and Pakistan had agreed on a number of steps to manage

their nuclear competition rationally, including measures to minimize accidental or unauthorized use of nuclear weapons. Both countries also said they would refrain from additional nuclear tests, unless one or the other decided that “extraordinary events have jeopardized its supreme national interests.”

The language of opprobrium had been completely replaced with the language of restraint and with promises to enforce stringent export controls in order to prevent further nuclear weapons proliferation. The arms control mentality of the late 20th century was re-emerging as the dominant model, with nuclear abolition a distant, if not utopian, dream.

The arguments made by India, Pakistan, and other countries chafing under the nuclear double standard imposed by the United States and the other nuclear weapon states carry great weight and must not be discounted. Both countries have refused to sign the 1972 Non-Proliferation Treaty (NPT) and the 1996 Comprehensive Test Ban Treaty (CTBT) on the grounds that these agreements have merely institutionalized a permanent two-tier arrangement of nuclear haves and have nots.

No less an abolitionist than Victor W. Sidel, MD, a founding member of Physicians for Social Responsibility (PSR) in the US and a past co-president of IPPNW, actually withdrew his support for the CTBT in its current form for these very reasons. “Without a real move by the NWS [nuclear weapon states] towards the abolition of nuclear weapons,” Sidel wrote in the October 1998 issue of *Medicine & Global Survival*, “the CTBT in its current form permits continued ‘vertical’ proliferation by the NWS, helps maintain the NWS monopoly, is provocative to the nuclear have-nots, and may actually intensify the nuclear arms race.” [9] Sidel promptly added, however, that the legitimacy of the grievance did not justify the actual nuclear tests by India and Pakistan, which he characterized as “self-destructive and immoral” – an assessment that one can hear echoed in India’s own 1995 presentation to the ICJ.

If the governments of nuclear-armed India and Pakistan have decided to pattern their security policies after those promulgated

by US and Soviet cold warriors, at least some South Asian physicians have chosen role models with a great deal more wisdom and insight. IPPNW was founded in 1980 by a small group of Soviet and American doctors led by Boston cardiologist Bernard Lown and his Russian counterpart Evgueni Chazov. Lown and Chazov reasoned that their common interest in survival was more powerful than the ideological divides between their two countries, and they believed that their obligation as physicians included a common commitment to the prevention of nuclear war. Building on research that had been undertaken by PSR in the 1960s, IPPNW studied the medical effects of nuclear weapons, including burn, blast, and radiation injuries. The doctors sounded a medical warning to humanity: that nuclear war would be the final epidemic; that there would be no cure and no meaningful medical response. For their efforts, which united physicians across the Cold War divide, IPPNW was awarded the UNESCO Peace Education Prize in 1984 and the Nobel Peace Prize in 1985. Throughout the 1980s and the 1990s, IPPNW comprehensively documented the health and environmental effects of the production, testing, and use of nuclear weapons.

The Indian Doctors for Peace and Development (IDPD), their counterparts in the Pakistan Doctors for Peace and Development (PDPD), and physicians and medical students throughout South Asia, are vital members of the international physicians movement to prevent nuclear war, which in recent years has broadened its mission to the prevention of all war. With tens of thousands of nuclear weapons in the world, with too many countries flirting with the notion of acquiring their own nuclear arsenals, and with the increasing danger that nuclear weapons could fall into the hands of terrorists and other non-state actors, any armed conflict now has the potential to escalate into a nuclear war. The only way out of this profoundly dangerous dilemma is the elimination of nuclear weapons worldwide.

In November 2002, IDPD President L. S. Chawla and PDPD President Tipu Sultan joined Drs. Lown and Chazov, along with IPPNW President Ronald S. McCoy and the presidents

of the India and Pakistan medical associations, in writing an open letter to their colleagues in the medical profession. "We call upon every health professional in both countries," they wrote, "to learn the facts about the medical and environmental consequences of nuclear war and to confront the terrible reality that you will be able to do nothing to help the victims if these weapons of mass destruction are ever used.... As guardians of the public health, we have a moral and professional duty to defend our patients from this ultimate threat to human well being. Our prescription for survival must be nothing less than a demand for the abolition of nuclear weapons." [10]

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— John Loretz

Program Director

International Physicians for the Prevention of Nuclear War

Foreword

PHYSICIANS' DIALOGUE WITH NUCLEAR WEAPONS DECISION-MAKERS

IPPNW (International Physicians for the Prevention of Nuclear War) informs politicians and other people about the medical consequences of atom bombs / nuclear weapons, aiming at a nuclear weapon disarmament process and a nuclear weapon abolition. Physicians in international co-operation have a unique opportunity to highlight nuclear weapons policy, lifting it from a limited national security level to a wider global health concern.

The most important target group for this information is obviously people involved in decision-making regarding nuclear weapons, i.e. politicians, diplomats, parliamentarians, researchers and economists in the nuclear weapons states. Since its inception in 1980, IPPNW has had discussions and dialogues with these decision-makers. Since 1997, a structured programme is followed: "Annual Dialogues and Seminars with Decision-makers at the Capitals of Nuclear Weapons States." The Oxford Research Group (ORG) is one of the important inspirations for this dialogue programme. ORG has mapped approximately 600 persons within the five initial nuclear weapons states, persons of main importance for the continuation of national nuclear weapons programmes. ORG has also stressed that researchers and civil servants within defence and foreign ministries play an important role for the continuation of nuclear weapons programmes (www.oxfordresearchgroup.org.uk).

A crucial question is whether or not the dialogue meetings between physicians and politicians and other nuclear weapons decision-makers will influence the nuclear weapons policy according to the IPPNW goals. We believe that this is the case if

the discussions and dialogue are prepared and performed in a respectful way and include the arguments that discuss the health effects of nuclear armament and nuclear weapons explosions. One example is the former Soviet Union President Mikhail Gorbachev, who in his memoirs expressed appreciation for the information given by IPPNW at face-to-face meetings. Physicians know very well from clinical experience that there is a therapeutic influence transferred within a personal meeting between patient and doctor. When you meet, you can rarely force a new idea into another person; you must try to support thoughts and viewpoints that already exist, but possibly are still at an early stage. During our dialogue meetings, IPPNW delegates have experienced that decision-makers often have a small doubt about the usefulness of nuclear weapons armament and the deterrence philosophy. After they have left their official posts, they can more clearly express such doubts and thoughts.

During our dialogue meetings, we must realise that the brain, to a high extent, works with pictures. The concept of “visions” comes from this reality. This is of pedagogical importance when we want to describe nuclear weapons disarmament and a nuclear weapon-free future. The brain will not immediately create a picture of a “a nuclear weapon-free world.” It will rather associate this abstract concept with nuclear weapons and the damage from Hiroshima and Nagasaki in 1945. The dialogue meetings must include visions and pictures of new security structures, confidence-building programmes and citizen collaboration across national, cultural and religious borders.

During our dialogue discussions, we should also highlight the question of whether nuclear weapons should be considered as useful military weapons or as political “weapons.” We have learnt from defence ministries and military experts that today’s nuclear weapons are useless as battlefield tools. Does this mean that diplomats and politicians use nuclear weapons as a political power tool? This must render the politicians a very low mark – threatening societies and the environment with annihilation instead of seeking common ground and solutions for future generations. The dialogue meetings can act as a catalyst

for thinking and planning for a new security. We come back to Albert Einstein's demand in the 1950s that we need "a new way of thinking." The IPPNW project "Instead of Nuclear Weapons" discussed and reported about at the R.F. Duma in Moscow in 2002 is an effort to create positive visions of new security structures (www.slmk.org).

IPPNW also brings expertise on the topic of "the human factor," man's physiological and psychological limitations within the high technology society. We agree that it is human to err and we also understand that technique can never be perfect. Thus, man and nuclear weapons can not go together any longer.

Another IPPNW programme, the "Nuclear Weapons Inheritance" involves medical students and other university students within the nuclear weapons states. Are young people in the nuclear weapons states in favour of inheriting present nuclear weapons arsenals, the costs for maintenance and the costs for disarmament? Should not such economy be used in a more constructive way for the benefit of education, health care and citizen diplomacy across borders? Will we not soon realise that we all live within the same "living room"! IPPNW clearly understands that confrontation between countries with common borders (such as India and Pakistan) creates a high probability for turning oral rhetoric into use of weapons and weapons of mass destruction, by intention or unintentionally. It is thus of great importance to have dialogue meetings with decision-makers in these countries, as well as in other states adhering to the nuclear weapons doctrine. We also believe that a nuclear weapons disarmament process can take place unilaterally or bilaterally! Sweden and South Africa are good examples of unilateral actions – either not fulfilling a planned nuclear weapon programme (Sweden, around 1960) or unilaterally disarming already-existing nuclear weapons (South Africa, around 1990).

IPPNW physicians and medical students will continue the Dialogue with Decision-makers programme, empowered by state-

ments from WHO (the World Health Organisation) and WMA (the World Medical Association), as well as by resolutions from the United Nations and a legal statement from the International Court of Justice at the Hague.

FACT TABLE 1

IPPNW dialogue with decision-makers meetings

1980-1996 : Soviet Union, **later** Russia, USA, England, France, China, the Middle East

1997 : Moscow **April**, Paris **October**,
London **October**

1998 : Moscow **April**, Washington **May**,
Paris **October**, London **November**

1999 : New Delhi **February**, Karachi **February**,
Moscow **April**, Beijing **October**,
London **October**, Paris **October**,

2000 : Washington **May**, Moscow **May**,
Paris **November**

2001 : Moscow **May**, London **October**,
NATO **October**

2002 : Washington **November**, Moscow **March**,
Washington **May**, Budapest **September**,
Paris **November**, London **November**

2003 : Moscow **May**, Washington **October**,
London **November**, Paris **November**

**Planning
for 2004 :** Islamabad **February**, New Delhi **March**,
Moscow **April**, Beijing **September** in
conjunction with IPPNW's World Congress

FACT TABLE 2

Examples of topics that have been discussed during Dialogues with Decision-makers and seminars in recent years:

Nuclear Weapons – Old Security

Nuclear weapons and health – medical aspects
Nuclear weapon treaties
Nuclear weapon deterrence philosophy
De-alerting – bringing nuclear weapons out of high alert
Nuclear weapon-free zones
NATO and the risk for nuclear weapons proliferation
Canberra-initiative
The International Court of Justice's statement
The Middle Power Initiative (MPI)
The NAC Initiative – the “8-nations initiative”
Comparisons between military and social expenditures
Human Factor – man as a risk within the high-technology society: it is human to err

Common Security – New Way of Thinking

Health and health care collaboration across borders
Common watersheds collaboration – the Baltic Sea and other programs
Common security
Peace education
Youth's fears and hopes looking into the future:
* Shape Your Future
* Life-Link Friendship-Schools Programme
* UNESCO's Associated School Programme, etc.
Confidence-building strategies and programs
Transparency
The project “Instead of Nuclear Weapons”

— by Hans Levander, M.D.

Deputy Head, Rheumatology Department, University Hospital,
Uppsala, Sweden Founder and Chairperson
Life-Link Friendship-Schools Programme

Foreword

DOCTORS AND THE INDIAN PEACE MOVEMENT

The organised movement for peace, later called the All India Peace and Solidarity Organisation (AIPSO) was born in May 1951 in Mumbai. The unimagined devastation in World War II, loss of life and the aftermath of the dropping of the atom bombs on Hiroshima and Nagasaki roused anger among all sections of the Indian people nurtured by our own national movement in support of the struggle for freedom of all peoples and for peace and harmony. Hundreds of thousands began signing the world appeal to abolish atomic bombs and for peace.

In this awakening and mobilisation for peace, among those who felt the urgent need for peace were Indian doctors, who specially felt that there must never be any more Hiroshimas or Nagasakis and tests such as those carried out in Bikini areas must be stopped. I remember top leading physicians in many states signing readily and supporting any programme for peace and against war.

Some of the most active doctors from various states were Dr. A.V. Baliga of Bombay, Dr. Nihar Manshi, Dr. Mani Biswas, Dr. Asit Ghosh of West Bengal, Dr. Habibullah, Dr. T. Gour, Dr. Madhu Sudan Sastry from Andhra Pradesh, doctors from Bihar were Dr. Sinha, Dr. Shakeel, from Madhya Pradesh were Dr. K.C. Lakhotia, from Orissa Dr. Nirupama Rath, and so many others from Kerala, Karnataka, Tamil Nadu. Punjab doctors under Dr. P.N. Chuttani's leadership also played a significant role as also many doctors from Delhi. I recall the faces of so many others and their active cooperation in building our movement, but at 85 I may be forgiven as so many names escape my memory!

The early growth of our movement owes much to the doctors,

besides lawyers, teachers, theatre and film people, artists, for helping and strengthening the peace organisation. By their speeches, through taking on organisational responsibilities, contributing money and time — they laid the foundation of the peace movement in the country in every state and the majority of districts. In the early days many would call it the doctors and lawyers movement for peace!

There were difficulties faced by the organisers in spreading the movement among the masses—the poor, the workers, the rural people. India had not faced the direct bombings and attacks of war, people felt India had no special enemies, our country had friendship with all. Mainly the indirect effects of World War II were faced by our people — the Bengal famine and shortages in our states, prices, scarcity of necessities, the loss of those of our soldiers who had died or were wounded, etc. etc. So to carry the message of peace, to build a mass movement had many difficulties.

In this effort the doctors in our movement played a major role. They explained the consequences on health and problems on life from war and its destructive and long-term effects, specially the new weapons of mass destruction. And people felt they could trust their doctors more than others, as they had no axe to grind unlike politicians etc.

I remember many people, poor workers, even trade union activists, rural people and the poverty-stricken would respond by saying: “Let the bombs fall. We are slowly dying anyway. Better to finish off instead of slow death through disease and poverty.”

Through speeches, films, exhibitions, charts, visits of people, specially doctors, from war devastated areas such as Japan and Europe, we were able to spread hope that if the vast funds spent on war preparations were diverted to health-care, education, housing, etc. life would be more than worth living. Doctors played a key role in this.

The separate movement of Indian Doctors For Peace was born in 1984 in Patna. It was at an International Conference of Peace Forces in Prague in the early 1980s that doctors in our Indian

delegation met doctors from the Physicians for Peace and Against Nuclear Weapons from U.S.A., U.S.S.R and U.K., etc.

These meetings inspired our own doctors also to start such an organisation, which would be able to draw even more doctors to the forces of peace. And AIPSO gave whatever help it could to these efforts and also whatever contacts they had on our sub-continent.

In fact about the same time scientists like Prof. Satish Dhawan of Indian Space Research Organisation (ISRO), Prof. Rais Ahmed, and so many leading scientists formed their own organisation of Scientists Against N-Weapons and For Peace.

The Indian doctors movement for peace was set up on an all-India level in Patna in 1984 as "National Association of Indian Doctor for Prevention of Nuclear War". Dr. K.L. Wig, Director of prestigious All India Institute of Medical Sciences, New Delhi was its founder president. He along with Dr S.S.Shrivastva as General Secretary expanded its activities in almost all states of India. Though an extremely busy person DR. K.L. Wig attended all national & international meetings of IPPNW. Unfortunately after attending an international meeting of IPPNW on his way back he was at Zurich with his son where he passed away during sleep. His contributions will remain the most important milestone of NAIDPNW & IDPD.

Dr. P.N. Chhuttani, Director of Post-Graduate Institute of Medical Education & Research (PGI) at Chandigarh, was the next president. He increased the strength of NAIDPNW still further. He also became International Councilor of IPPNW from 1987 to 1989. He remained President of NAIDPNW till 1989.

Dr. Shyamal Sen a renowned Neurologist from Calcutta was the next president from 1989- 1991. Dr. C. M. Habibullah a famous Gastroenterologist and Director of Nizam Institute of Medical Sciences, Hyderabad remained president from 1991 to 1996.

Dr. L.S. Chawla, Member Executive Committee of Medical Council of India and founder Vice-Chancellor of Baba Farid University of Health Sciences, Faridkot (Punjab) took over the reigns of NAIDPNW, which was rechristened as Indian Doctors for Peace & Development (IDPD) in 1997 and he continues as its president till

date. After Dr. Usha Shrivastva, Dr. Arun Mitra was elected General Secretary at the national conference on 7th April 2002.

IDPD has well established and active chapters in 16 states. Dr. L.S Chawla, Dr. Arun Mitra the General Secretary IDPD along with many other office bearers from central office and states have been actively participating in international meets of the IPPNW. They attended the World Congress of the IPPNW at Washington DC in 2002. Dr L.S.Chawla read keynote address in the National Conference of the MAPW of Australia at Adelaide in the year 2003. They also participated in the South Asian meets at Dhaka & Nepal.

The IDPD is actively involving medical students who have been participating & organizing various meetings in different cities all over the country. The students also participated in international & regional meetings.

This doctor's movement set up a Peace Park in Manipur under the guidance of Dr. Nara Singh and other leading doctors of the state.

In strengthening and reaching out to wider sections, Dr. Bernard Lown played a memorable role in helping our movement in India during his 2 or 3 visits at conferences and seminars. During one visit, AIPSO had the privilege to host a dinner in his honour. And while he was impressed at the function to meet many university vice-chancellors, MPs of all parties, scientists, doctors, and other intellectuals, trade unionists, lawyers, women activists, and leading peace workers — they in turn understood from him the importance of Physicians Movement For Peace And Against Nuclear Weapons.

The AIPSO will be ever indebted to the significant and leading role, which doctors in India played in spreading the message for the need for peace and for banning the weapons of mass destruction. Our close interaction, we hope, will continue in the interest of peace and the banning of nuclear weapons.

Ms. Perin Chandra

Former General Secretary

All India Peace and Solidarity Organisation (AIPSO)

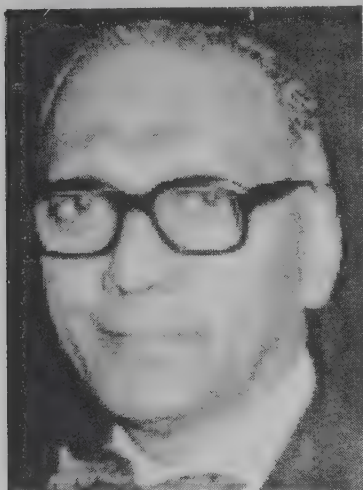
Presidents of IDPD from Foundation till date



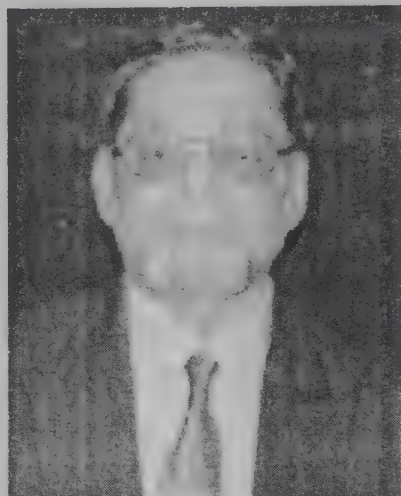
Dr K L Wig
(Founding President)



Dr P N Chhuttani



Dr Shyamal Sen



Dr C M Habeebullah



Dr L S Chawla
(Present President)

ABSTRACTS

It is estimated that 23% of world population lives in South Asia while 43% of global poor are accommodated here. With the break-up of Russia, cold war (1950-70) has given way to newer areas of exploitation by Multi National Corporations (MNCs) in health sector. A techno-centric approach to poverty and transfer of technology on their own terms is the anchor of MNCs' notion of development. WHO has moved from Alma Ata declarations to Public-Private partnership with state looking after the primary health care and tertiary care passing on to big business who glorify the use of technology for treating diseases, while 40% of population loses access to any health care worth the name. South Asia is investing less than 5% of GDP on health while demand for arms especially nuclear in these countries is rising. This has to be fought and changed.

– Dr Imrana Qadeer

We see violence in our homes, society, country and worldwide. Individually one may suffer torture, beatings, rapes, loss of family and homes resulting into depression, agitation and hallucination. Wars between countries uproot families and cause disability resulting in mental health problems at mass scale. Although we cannot abolish violence fully, we must make effort to minimize it so that more and more people could live in peace.

– Dr N N Wig

New Health Policy 2002 talks of providing health care through private sector using its capital but by charging the user, which is out of question for 43% of the poor and

under privileged people. Government must increase spending on health especially primary care otherwise no improvement is possible.

The Alma Ata declared health for all by 2000 as the goal in 1978 which was adopted by India in 1983. A semblance of a national health structure had been built over the years. But present government has declared that it can not provide health care to all and invited private entrepreneurs to take over the health sector and charge whatever it feels right leaving 44.2% of population in the lurch.

– Parduman Singh

Physicians are often viewed as of Demi-God and their decisions are taken as gospel truth without any doubt or misgiving. This imposes immense responsibilities on physicians to maintain an ethical, correct and honest approach in their dealing with the patients. But this is a challenge in the South Asia.

– Dr. Rashid-E-Mahbub

The South Asian region is witnessing a mad arms race, relegating the more important issues of health, poverty alleviation, hunger and sanitation into the background. India spends 17% of central budget on defence while Pakistan's ratio for the same is 36%. If only half of these are diverted to social causes, immense benefits could accrue. But the powers-to-be and their cohorts in the west will do nothing of the sort. Efforts have to be made to progressively decrease defence spending so that more and more people could benefit. Let cooperation rather than confrontation be the password.

– Dr Rakesh Datta

The continuing confrontation between India and Pakistan, was further exacerbated by their nuclearisation and weaponisation programmes in May 1998. Indeed the other members of SAARC

are paying the price for the intractable behaviour of their bigger partners. Militarism and historical baggage has impacted to a great extent the bilateral relationship between India and Pakistan. The advent of the new millenium is a great opportunity for India and Pakistan to understand that both their destinies are intrinsically linked through geography and history. The time has come for both India and Pakistan to shed their old mindsets and to look at creative and pragmatic alternatives to settle their outstanding disputes.

– Admiral L Ramdas

The logic of seeking security through nuclear weapons has taken a beating many times. Even the setting up of Nuclear Command Authority by India is only going to make matters worse. The idea of no first strike and effective second strike for retaliation have lost meaning with both India & Pakistan, busy enhancing their nuclear capabilities. Both neighbours should work for nuclear demilitarisation within stipulated time frame; otherwise disastrous consequences might follow.

–Achin Vanaik

Arms industry has become one of the most powerful non-governmental powers that control people in governments of the day. While legal arms sale between nations and corporations can be gauged and measured, the illegal arms trade and proxy wars across the world are the biggest threat to so called human securities. It is clear that more production of arms and sending these to areas of conflict do not give any security. People of the world have to raise their voice so that arms race is progressively scaled down to manageable limits and armaments producing industry is put to some sort a control, otherwise human race is heading towards destruction all the time.

– Ms Sonia Jabbar

Fundamentalism fuelled by state support has tried to break the bonds of historical unity between communities as we have seen with riots and demolitions over and over again. Added to this,

the mantras of privatization, globalisation and liberalization, we have a handy cocktail, which is going to destroy our economic independence and social fabric based on Ahimsa and mutual respect. The above formula broke Yugoslavia many times over. Indian resilience has stood its ground but; for how long? We have to regroup forces of communal amity and economic independence to expose the role of imperialists and their servers in our midst.

– Admiral Vishnu Bhagwat

South Asia nevertheless stands out as the region where the likelihood of use of nuclear weapons is high—far higher than anywhere else, or in relation to the Cold War after the Cuban Missile Crisis of 1962. Nuclear deterrence might appear attractive as a commonsense-consistent idea: if you can threaten your adversary with “unacceptable damage” in case he attacks you, you can deter or prevent him from attacking you—and thus become secure. In reality, deterrence is only a rationalisation for the existence, maintenance and perpetuation of nuclear arsenals.

– Praful Bidwai

Violence is fast becoming a major determinant of mortality and morbidity in Nepal. Apart from killings, the physical and mental torture associated with violent conflicts, mutilations and war injuries, shortage of food and essential medicines in the conflict areas, violation of ethical practice of health professionals in carrying their professional duties are some of the direct consequence militarization on health. Militarist approach of the government to peace may only invite more violent response not only from the Maoists but the agitating political parties as well. Therefore when there is still time the exploration of peaceful solution of constituent assembly appears to be the only way out of this impasse, before even this option loses its rationale in the mire of violent armed conflict in Nepal.

– Dr Mahesh Maskey

Most nation-states of the world have been created through the ideology of nationalism and their boundaries have been de-

fined after conflicts.¹⁷ Nations need nationalism and homogenous entities. To construct these they create the “other” who is opposed to “us” in the nation. This other is the enemy, the outsider, against whom the nation must struggle. Values and emotions of nationalism that characterize the ‘modern period’ also sustain the twin values of militarism and patriarchy. Nationalism played a progressive role in history linked with the process of modernization, anti-colonialism and secularization. But since patriarchy and militarism were part of nationalism during these formative periods they have been retained in the ideological and institutional structures of the state. Not only do alternative theories of IR, nationalism and national security have to be engendered, these also have to be de-statised and democratized.

– Kamal Chennoy

The lines of divide between the India and Pakistan created as a result of two-nation theory by the vested interests have only made lives of millions of people on both sides miserable. It is high time governments on both sides continue the initiatives further to change the dividing lines into meeting lines. The Berlin wall has fallen. Why can’t we achieve it too between India & Pakistan? This will lead to free flow of people across the border and benefit population on either side.

– Tipu Sultan

Historically speaking the women's movement in the world emerged as a peace movement. They demanded peace as because they are directly and specially impacted by the ideology of militarism, the whole process of militarisation of society in all its aspects and then in situations of war and civil strife.

The patriarchal construction of a woman's body as symbolising the ‘territory’ or ‘property’ of the enemy which has to be violated is the belief that leads to mass rape as part of genocide, humiliation and destruction of the enemy. The perpetrators of

sexual violence include military, state security forces, armed perpetrators of inter-community sectarian and ethnic conflicts.

The violence against women does not begin or end with war, it is in continuum. The ideology of patriarchy, militarism and fundamentalism legitimises oppression on women.

– Amarjeet Kaur

Use of Pesticides has been compared to war on pest. The theory of reductionism has failed to finish pests and weeds just as increasing armaments have failed to end conflicts. We must practice the theory of live and let live, return to organic manure and try cutting out the hazards of accidental poisoning and even willful poisoning. Navdanya seeks to establish system of sustainable and just food culture reducing the huge investment in pesticides & weedicides.

– Dr Vandana Shiva

CHALLENGES FOR PUBLIC HEALTH IN CONTEMPORARY SOUTH ASIA

Dr Imrana Qadeer

Most medical professionals believe that it is their labour and commitment that is responsible for the health of the people. Without undermining the value of their work, it needs to be pointed out that, if health is well being, then there must be many other factors that contribute to health. Political, economic and social forces determine not only the conditions of life and therefore, well-being, they also shape the structure of services. To this extent, the logic of imperialism - which is a specific set of economic relations - also influences public health. This paper looks at South Asia, first presenting a perspective on how public health is being undermined in the region, and then looking at the key processes that are responsible. We mainly focus on the period after the countries of the region won independence. The three barriers we examine are the nature of development in the region and its impact on health, the process of militarisation and its implications for health and privatisation and the Health Sector Reforms process. We end by underlining the dangers that public health faces in the region and the need for intervention by professionals.

PUBLIC HEALTH - THE SHIFTING EMPHASIS

A popular definition of public health by Winslow is, "It is the science and art of preventing disease, prolonging life and promoting physical and mental health and efficiency through organised community effort for the sanitation of the environment, the control of community infection, education of individuals in principles of personal hygiene, the organisation of medical and nursing services for the early diagnosis and preventive treatment of diseases, and the development of the service machinery which will ensure to every individual in the community a standard of living adequate for the maintenance of

health” (Park: 2000). Thus solidarity and equity are the essence of public health and that cannot be a function of technology alone. This spirit was imbibed by the Alma Ata Declaration, which conceptualised health as the core function of development, encompassing the securities of life, livelihood, and basic services including food, health, education, housing, sanitation, drinking water, electricity, and transportation. The Declaration emphasised the interdependence of health and the overall progress of communities based on principles of self-sufficiency and affordability (WHO: 1978).

This is a specific approach to public health, which stands in contrast to the dominant biomedical perspective that technology alone can achieve health, as it is a biological and not a developmental process. Several studies have shown the importance of socio-economic development for health (Smith: et al: 2001, Mackintosh: 2001) and the implications of inequality for it (Benzewal et al: 2000). The argument that health contributes to development is not new. Myrdal popularised the concept of human capital in the 70s when he argued for investing in health for productivity (Myrdal: 1968). The critical issue is that, historically, the health of the labouring classes has always been the last priority in any sector of the capitalist economy. It becomes an issue only when labour organises and fights for itself (as in the First World) within an opportunity provided by an expanding production system (Elling: 1986). Instead of learning from history, most South Asian Governments are being advised to divest the working class of livelihoods and employment through closures, retrenchments, and casualisation.

Many nations have enhanced the degree of exploitation of labour by withdrawing their privileges and the right to organise and strike. The shape of the economy, in any case, does not give labour a chance to bargain? At the same time, funding agencies are pushing for investments in health, knowing well that cheap labour is freely available in backward capitalist economies and can be forced to work through changing labour legislation. Why then, are the World Bank and the entire international community so keen to invest in health in South Asia? Is it for improving

the health of the common people? Do these countries necessarily need the hi-tech medical technology transfers that are being worked out through public-private partnerships? Or is poverty and disease a new opportunity that business must not miss as it provides - unlike the arms' business - an added legitimacy to profits? These are questions we will return to later but it is evident that poor conditions of work in protected industrial areas are the real indicators of the intent of private capital.

What we would like to underline here is the shift from the holistic perspective of Winslow and the Alma Ata Declaration to another that treats health as techno-dependent and amenable to commodification. To push this biomedical perspective a theoretical shift is taking place that affects public health at the level of concepts, resources, system management, availability of technical know-how, self-sufficiency, and above all, cohesion and co-operation between those who are responsible for public health as well as those who are its recipients (Qadeer: 2001). The shift in concept is evident in the WHO itself when it recently proposed a behavioralist model of intervention that places individual responsibility at centre stage (WHO: 1996). The challenge before it has been redefined to address only population control and some selected communicable diseases at the cost of its earlier broad-based approach. The push for privatisation and multinational company (MNC) partnerships has already changed the composition, the priorities, and the guiding principles of WHO (McCarthy: 2002). As a result the institution has taken a lead in destroying its own agenda set at Alma Ata.

When the private sector acquires a significant space in health services, then destabilisation of public health becomes imminent, especially in situations where states are reluctant to evolve any effective regulatory mechanisms to continue to provide for the poor. Guided by the profit motive, the private sector appropriates medical care and leaves preventive services to the public sector (including disease control programmes, immunisation, and family welfare). By not participating in a cohesive structure of standardisation of therapeutic regimes, monitoring, and data

collection, it disrupts the working of disease control programmes. Experiments to make the private sector institutions responsible for the poor have not succeeded and, in any case, most of them choose to locate themselves in comparatively developed areas and not in the backward areas (Baru; 1993). Despite all this, the current reform policies are pushing for a not so “new vision” of public health where privatisation and partnerships are the key words (Rafei: 1997). Can these policies alone be held responsible for the rapid shift today? To clarify this we need to understand the history of the private sector in the region so that the elements of continuity become visible.

Political and Socio-economic Developments

For South Asian public health, the 20th century has been crucial because critical events shaped the politics of the region and influenced the conditions that determine health. Under colonial rule, the British let their doctors exploit the nascent health market to make profits and to keep their doctors occupied as Indian Medical Service employees (Crawford: 1914). Nevertheless, they recognized the link between poverty and health when droughts, floods, and famines led to a fall in their revenues. Subsequent relief measures and famine codes changed the death patterns due to cholera and malaria after 1920, when a sharp fall in mortality rates was recorded without any decline in their prevalence (Zurbrigg: 1992). After freedom from colonial rule, the national movements set out to tackle years of underdevelopment, inequality, and oppression by initiating the process of self-governance, but were bogged down by the internal contradictions of their social systems. Thus, development remained synonymous with economic growth and even when the issues of distribution and entitlement were recognised, not much could be done about it.

In India, for example, Nehru posed the question whether concentration of wealth in the hands of a few was a happy sign? The Planning Commission set up a committee with P. C. Mahalanobis as its chairman and, for the first time, the government recognised the seriousness of the monopolistic trends that had gained strength over the first three Plans. A series of com-

missions and committees such as the Monopolies Enquiries Commission, Hazare Committee to look into licensing, and in 1970, the Sarcar Commission grappled with the same questions without much success (Tharyan: 1974). Concentration of wealth and monopoly became stronger and led to the growth of an exclusive market catering to the consumption needs of the nascent middle class. Pakistan, right from the beginning, depended on free markets and therefore, had problems of self-reliance and poverty. Nepal and Bangladesh were too poor, with a powerful elite not ready to try to get out of the poverty trap without external assistance. The only exception was Sri Lanka which succeeded in not only bringing down its poverty but also significantly improved the welfare of its people, until it was hit by internal strife (Fernando: 2001).

The period after the 70s was therefore, characterised by a shift towards greater dependence on external resources. By 1997 the region as a whole carried a debt burden of \$150 billion (Qadeer: 2001). The initial international aid was on terms favourable to the recipient countries. However, with the collapse of the Soviet Union, the international funders changed their strategies. The lending patterns changed over time in size as well as scope, as the Bretton Woods institutions, specially the World Bank, began to see the value of investing in areas such as health. By the 80s, the policies of the South Asian countries began to be influenced significantly by these institutions. At the same time as South Asian produce was denied entry in the international market, foreign capital started penetrating their partially protected markets. This affected the export of the developing countries and compounded their economic stagnation and led to crises. Consequently, they had to accept Structural Adjustment Policies (SAP) that were thrust upon them by the international lenders (WHO: 1992).

When the East Asian Tigers, Thailand and Indonesia - created by SAP and projected as a panacea for the ills of the South Asian countries - were hit by a crisis in the late 90s, the dangers of the SAP trajectory were revealed. The East Asian crisis led to 15% of the population losing their jobs in Thailand. In

Indonesia the prices of drugs increased by 200 to 300%. The lessons for South Asia were that it was its reluctance to liberalise that saved it from a financial crisis. It remained to be seen if it could still save itself through adequate institutional reforms (such as land reforms, progressive taxation etc.), investment in welfare (health and education), regional co-operation, promotion of savings, and adequate controls over short-term capital investments (Haq: 1999). These lessons, however, remain unlearnt and the region remains caught in its predicament. The civil war in Nepal, the tensions between India and Pakistan, and the continuing problems in Sri Lanka make healthy co-operation a far-fetched dream.

An inevitable outcome of these events was the entrenchment of poverty and the inability of governments to deal with it and its consequences. The region is known to have the largest numbers living below the poverty line (Table - I). According to Haq, out of 1.3 billion poor (estimated by the criteria of \$1 earned per day), 515 million live in South Asia. Thus, while 23% of the globe's population lives in the region, it accommodates 40% of the globe's poor. While, over the 70s, the poverty levels declined, there has been a slowing down or even a reversal of this trend over the 90s. Though India's official claims project a decline after 1995, economists express serious reservations about the methodology used and therefore of the validity of this claim (Sen: 2000). On the whole the Asian population under the poverty line, according to Haq, is 43% - a level that cannot be easily ignored. It leads to low investments in education and even lower inputs in health, high levels of inequity, and growth rates that are tied to overseas development assistance (Table - II). Along with this trend there is also the emergence of a middle class that presses for the growth of consumer markets and demands quality luxury goods.

The extent to which the countries of the region have succeeded in meeting the challenges is adequately reflected in health indicators. The mortality rates for infants continue to be as high as 58 to 84. Maternal mortality remains at 350 to 540 and under-five mortality ranges from 83 to 107 (Table - III). Overall life

expectancy has barely gone above 60 years and is as low as 43! The supportive services for health are invariably poor and unsatisfactory. For example, sanitary facilities are not accessible to more than 50% of the people, except in Sri Lanka and Pakistan. Populations using impaired water sources are uniformly high, and the severely undernourished population as a percent of total varies between 20 to 38%. (Table - III). While Sri Lanka, despite an on-going civil war over the 90s, has managed to retain its advantage, Pakistan, despite lower levels of poverty over the 90s, has done poorly in terms of health. Its current growth rates further reduce its prospects to make up for the losses (Table - II). India, though slightly better comparatively, leaves much to be desired. The most poignant is the UNDP assessment of these countries regarding their efforts in achieving gender equality. Among all the 162 countries, Bangladesh stands 121st and Nepal 120th, with Pakistan and India being placed at 117th and 105th (Table - II).

Reviews of health services from the region show that the governments heavily depended upon experts who were limited by their biomedical visions. They developed programmes for filaria, malaria, and leprosy, and the directly observed therapy for tuberculosis, as well as the reproductive and child health programmes. These were all like turnkey projects, never really tested in the South Asian context (Banerji: 2000). To understand why health stands where it does in South Asia, therefore, we need to understand not only these trends in public health but also the links between the dominant trends and processes such as militarisation and expansion of medical markets. We turn to these questions now.

Militarisation – Cold and not so Cold Wars

An important feature of the period was the Cold War between the US and the USSR over 1950 to 1970, which divided the countries of the region, and initiated proxy wars between them. India's war with China in 1962 and with Pakistan in 1965, 1971 (when Bangladesh was born), and 1999 are some examples: The political tensions over borders seriously affected welfare services as more and more resources were shifted to defence

and security (Tables - II, IV). A result of the shift was procurement of higher aid and loans that led to both dependence and debt (WHO: 1992). The stark difference between expenditures over health and defence, as shares of national expenditure, reflect official priorities. The trend is however, global which makes it even more serious. The comparison of defence expenditures between the First and the Third Worlds shows that the former, which spent ten times more on defence in the 60s, now spends only less than five times more (Table - V). This points to the shift in the location of wars over the period, while the producers of weapons remain primarily in the First World.

To begin with, wars were between combatants and did not affect the civilians as much. However, with the increasing sophistication of weapons and their power, civilian casualties have become a major issue. The nuclear bombing of Hiroshima and Nagasaki, with massive destruction from the blast, the heat, and the radiation, caused 232,661 acute deaths (other than the Korean and military deaths estimated at 20,000) and 78,000 people were wounded within a 2.5 km radius - apart from the unrecorded slow death and chronic suffering (Yokoro: 1997). The US unrepentantly kept the war in Vietnam going for ten years at the cost of 3,000,000 Vietnamese (7.7% of the population) and 58,000 US military personnel. After the war, in Saigon itself, delinquency showed a five-fold increase and 360,000 disabled had to be handled (Alukian et al: 1997). Two million children became war casualties during 1980-1990, and 80% of the 20 million killed and 600 million wounded people since 1945 have been civilians. In Angola, 7000 children were thrown out on the streets with nothing to look for except hate and cruelty. The US has subsequently promoted war in the Gulf, Afghanistan, and now threatens Iraq - all in the name of democracy and justice.

It is always the children and the women who suffer most. In Iraq a study done in 1991 showed that infant mortality rose from 33 per 1,000 to 93 per 1,000, causing 33,000 excess deaths over eight months. Of the 111,000 total deaths, 70,000 were children under fifteen years of age. In the post-war period civilian

deaths were 30 times higher than over the period of war. Other than dying, women pay very many other costs. Rape is not only common but is a well-known weapon of war itself. The comfort women (Chinese, Korean, Filipino, Indonesian, Burmese, and Dutch) abducted and forced into submission by the Japanese in the Second World War, and the women of Bangladesh imprisoned and raped by Pakistani soldiers, are no different from the women in Africa (Turshen: 2001). The women victims of ethnic wars within and outside the region are very much a part of our contemporary life (Butalia; 2001). Following their sexual exploitation is the morbidity that comes with it - AIDS, sexually transmitted diseases, or the mutilations that follow resistance on their part. Even the fortunate ones suffer in terms of maternal health, nutrition, and the burden of caring for a mutilated family. The destruction of hospitals, roads, shelters, water supplies, and all other infrastructures only adds to the misery of those who remain after the devastation.

Death and disease are not the only public health problems that wars generate. In Vietnam, for example, the American armies left behind 600,000 tons of unexploded bombs and mines (Alukian: 1997). 2.2 billion hectares of forest land, crops, and plantations were denuded through bombing, land clearing, napalming, and defoliation strategies using 72 million litres of herbicides. In Kuwait, the 752 oil well fires and oil spills killed countless plants, birds, and water bodies (Levy: 1997). What is thought-provoking is that, while the powerful countries today, in a show of their humanism, are setting up a Global Fund of \$800 million for one year to fight diseases in the Third World, only \$10 million were received for a year when the UN Office for Coordination of Humanitarian Affairs appealed for \$63 million for removing mines in seven countries (Graca: 2001)! Why malaria, tuberculosis, and AIDS alone elicit a response from the economic elite should not be very difficult to guess.

Problems for public health work neither begin nor end with war. The very preparation for war is a problem and the aftermath of war too is left to public health professionals to deal with. A common experience of the Third World countries is the lack of safety

around army firing ranges where efficiency is practiced! Not only is productive land acquired and populations forced to move away to seek alternative livelihoods, the ranges also become dangerous as people become victims while collecting scrap metal of the exploded and unexploded shells for a living. Poisoning of water and land by toxic chemicals is a major hazard of military bases as their dumps diffuse slowly over time, or even suddenly, to cause massive damage to life and property. Armies compete for basic resources such as fuel, metals, non-metals, food, and services. It is roughly estimated that the military use of aluminium, copper, nickel, and platinum surpasses the entire Third World demand for these. The high combat machinery used is certainly not fuel-efficient and therefore contributes to proportions of pollution that surpass the share of energy consumed (Renner: 1997). Other than the problems of mines the post-war burdens include tasks of reconstruction, taking care of the disabled, the orphaned, and the homeless.

Despite its blatantly destructive nature, militarisation became integral to nation states due to its power to annex boundaries and resources for growing economies. Its ideology, militarism, served as yet another instrument of control and pervaded all spheres of social life in peacetime as well (Chenoy: 2000). We look at arms trade and expenditure on militarisation in order to understand the difference between these two. There was a sharp decline in arms purchase by the Third World countries over 1987-94 from \$41.7 billion to \$10.8 billion. The fall of the USSR and the pressure from aid donors contributed to this decline. Paradoxically, the end of the Cold War left many First World countries holding surplus weapons. This was diverted to international markets at reduced prices. Russia, for example, was bartering its arms for coconut oil and sugar (Sivard: 1996). Instead of trading, however, the Third World countries are now asking for technology to produce weapons. This would invariably lead to more arms production. What is sobering to know is that while the OECD countries account for 62% of the world's military spending in 1997 (from 48% a decade earlier) and the US spent 33% of the total global expenditure, the Third World countries total spending has gone up from 17% to 28% over

the same period. In 1997 they spent a total of \$232 billion and East and South Asia, South America, and North Africa were the prime spenders. Thus while the power stays with the US, wars have been exported to the Third World.

It is not surprising then, to understand why South Asian countries today use war strategies in the time of peace for issues that need to be resolved socially and politically; why the violation of the medical ethic of neutrality of the physician in a situation of conflict is becoming a reality (Medico Friends Circle: 2002); and why the technology for death continues to be most coveted. In the industrialised countries, R&D represents one-third of military expenditure. An interesting feature is that over ten years (1984-1993), while the US spent 72% of its total research budget on the military, the Europeans have had a different priority. They invested 72% of their research resources to civilian needs like health, education, food, and energy (Sivard: 1996). Even in their trade they have moved to the safer areas of philanthropy and service. Yet, militarism remains in the strategies they use as the ideology of control. A techno-centric approach to poverty and transfer of technology on their terms remains the anchor of their notion of development. They too push for the set of reforms offered by the World Bank and hope to compete in the service market.

Privatisation and Health Sector Reforms

After independence the South Asian countries had hoped to build a powerful public sector that would make the private sector irrelevant. Initially however, recognizing the paucity of personnel, the private sector was not only left untouched but also given support and encouragement to participate in medical care (GOI: 1946). The early private practitioners were autonomous entrepreneurs who invested their capital to set up their practice. Over time they rapidly invested in polyclinics and private institutions - both hospitals and nursing homes. From 66,926 beds in the private sector in 1973 it went up to 210,987 beds in 1993, as compared to 230,161 and 365,696 beds in the public sector for the same years. The control over these private institutions remained in the hands of the investors, as they were registered

as private proprietary concerns, trusts, or societies. The latter were doubly useful as they projected a social welfare image while saving on tax. Apart from the small professional ventures, the big business houses were also using this means to diversify their capital (Baru: 1998). In the 90s, a new form of enterprise emerged in the private sector – the corporate hospital.

Registered as private limited companies these institutions functioned like industrial units. The earlier notion of public-private partnership encouraged by planners like Bhore (GOI: 1946) and Mudaliar (GOI: 1962), and practiced by many public sector institutions, was completely rejected by them. Earlier the private doctors devised methods to learn from the public sector institutions, while the public sector practitioners set up their private practice. The corporate hospitals, on the other hand, asked for favours from the government all right, but had no formal links with the public sector institutions. The services they offered had little to do with national priorities, instead they offered the most advanced technological services that brought high returns. In the process they played a critical role in changing the pattern of demand among the middle class itself and set up standards of care for the vocal elite. They also attracted the highly experienced public sector doctors through consultancies and post-retirement jobs, as in the case of the Sita Ram Bhartia Hospital, which began as a non-invasive heart research institute with tax exemptions, but today runs a full-fledged tertiary care hospital.

In the corporate sector the doctors were neither autonomous nor public servants. In other words they lost control over the ethics of practice itself by becoming an efficient cog in the making of profits. Corporate hospitals reflected the growing power of national capital and its conquest of new sectors for diversification. Yet, there was no hard evidence to demonstrate that the services of comparable private and public institutions were qualitatively better in the former in terms of diagnosis, treatment, and outcomes (Baru et al: 2001). The corporate sector camouflaged its real nature of stratification, and lack of standards and quality, while gathering the support of the industries producing

new drugs and equipment. Since the WHO proposed “public-private partnership” as a solution to the receding state investments in health (Rafei: 1997), private providers were included in the count, thus disguising the poor coverage of population by primary care institutions (World Bank: 1997) and making the concern for secondary level care less daunting. Tertiary care was also handed over to the private sector and the principle of disinvestments became applicable to health institutions as well.

These changes in the health sector have led to yet another complexity. When the WTO laid down its rules in 1995 as part of the old GATS (General Agreement on Trade in Services), the non-profit areas were left untouched. In 2000 however, the protective clauses were withdrawn under the pretext that health services had a significant component of private providers. Restrictions over risk pooling, cross subsidies, and non-market mechanisms of distribution were imposed to open up the public sector health institutions (Pollock: 2000). The process of corporatisation of medical care over the 80s corresponded with the pressures of SAP and none of the South Asian countries were able to invest the proposed 15% of their GDP in health (GOI: 1946). In 1970-1996 only Sri Lanka was able to maintain its initial level of investing in health (Fernando: 2002). Bangladesh was yet another exception: it started its health service planning with only 2000 million takas for 1973-78, and it was only through SAP loans that it could invest 62,272.40 million takas over 1997-2002 (Khan: 2001).

Pakistan's expenditure on health services was 4.5% only for a short period over 1988-1990, and a little over 1% till 1993, when it fell to 0.4% (Zaidi: 2001). India, which began with 5% on health, came down to an investment of around 1% of the total over the 90s. Most South Asian countries had low investment levels in health. The reforms only deepened the crisis by introducing further cuts, pushing privatisation of medical care, introducing user fees, and opening up public sector institutions to private investment. Casualisation of paramedical workers, hiring private sector doctors on contract, giving autonomy to public sector hospitals (to be run through self-management),

and introduction of private insurance are some of the new experiments. Even if some of these collect funds and release government from supporting them, it is clear that these strategies further marginalise those who are already marginalised. Firstly, the objectives change from serving to earning, and the emphasis shifts from epidemiological priorities to services that ensure high returns. Secondly, given the high level of absolute poverty, 43% Asians are excluded as they cannot pay. Yet, the World Bank continues to maintain that expenditure in the tertiary sector health care should be cut back as it is economically inefficient (World Bank: 1993).

Reforms thus change the very objective and structure of the health services. The role of the state is to regulate policies, laws, and subsidies in favour of the private sector and provide the so-called “essential public health and curative packages” (World Bank: 1993). These packages do not include what is needed but what the donors and financiers would like to sell. The preventive programmes, therefore, are completely reoriented to bring hi-tech medical technology centre-stage and ignore simpler, locally available, and effective technologies. Also ignored are the issues of people’s access to food, drinking water, housing, electricity, transport, and above all, jobs and livelihoods that are being destroyed in the name of development. There is a clear contrast between the needs of those living in or at the edge of poverty and those who have entered the world of the new middle class. The conflict between them poses a political challenge that is being handled by promises of a bright future for the poor through disinvestment of the best public sector institutions including hospitals (Jindal: 2002).

It is important therefore, to understand the real nature of the public-private enterprises that have now moved from the national domain to the global arena.

PARTNERSHIPS FOR PROFITS OR PUBLIC HEALTH?

Gro Harlem Brundtland, Director General of WHO in 1998, believed that a financially precarious WHO could forge partnerships with MNCs vulnerable to social criticism. Many MNCs were

also seeking avenues to reduce the risks involved in marketing new products. Thus, the International Commission of Commerce to promote global action against communicable diseases involved the UN and over 7000 commercial companies from 130 countries (Buse et al: 2000). Another UN-sponsored partnership emerged when private capital joined hands with drug industries to form the Global Alliance for Vaccines and Immunisation (GAVI) in 2000, initially funded to the tune of \$750 million by the Bill and Melinda Gates Foundation (Brugha et al: 2002). Yet other examples are Medicine for Malaria Venture, Global Alliance for TB Drug Development, and International AIDS Vaccine Initiative. Companies such as Myer, Squibbs, Glaxo, Wellcome, Pfizer, and Merck have benefited from these partnerships between private and international funding agencies. The latest in the series is social venture capital - small risky firms that deal with several drug industries and academia, transfer science into technology, and produce affordable products for the market (Wheeler: 2002).

The success stories of these global public-private partnerships (GPPP) involve multiple activities through which they find direct access to markets in countries avoiding checks on imports. Apart from providing a range of global advantages for MNCs, they are also able to influence the WHO and the World Trade Organisation (WTO). It is argued that both must work in close cooperation with MNCs because WHO is closely associated with disease control programmes, and WTO has to grant intellectual property rights (IPR) to companies so that they can lower prices (Wheeler et al: 2002). The MNCs have an understandable interest in the emerging large middle class markets of South Asia. One way to break the gates is to use humanitarian values and the age-old refrain of White Man's concern for the misery of the Third World. It is argued that globalisation forces the First World to confront the problems of the Third World and help deal with it. Under the guise of philanthropic activity, Europe is the biggest exporter of services (Price et al: 1999) and more than one-third of US economic growth over the past five years has been due to export of services (corner House: 2001).

Drawing from these experiences, the latest effort is the establishment of a Global Fund for AIDS, TB, and malaria control. US, Japan, Italy, and UK have pledged over US\$ 2 billion to the Fund - "almost all of which are from public sector" (Editorial: 2002) for the removal of poverty and disease in the Third World. The experience of GAVI in four countries of Africa however, shows that the projects failed to succeed as infrastructures were weak, technology alone was inadequate for disease control, and the MNCs' production agenda was incompatible with people's needs (Brugha: 2002). The WHO's Commission on Macro-economics and Health (CMH), set up in 2000 and headed by former World Bank economic adviser Jeffrey Sachs, is yet another move to work towards the goals of the world's big powers (Horton: 2002). The Commission proposes investments in health in the Third World as they are crucial for development (WHO: 2001) but never defines "development for whom?". Having forced tertiary care into private hands with states playing supportive and subsidising roles, the MNCs are brought in to complete the commodification of health services.

What are the consequences for public health then? If public health is an outcome of democratic and equity based systems, then the nature of development cannot be ignored. Today, when South Asia is struggling with declining opportunities, threat to food security systems, loss of control over livelihoods by farmers, artisans, and workers, and rising costs of living (Haq: 2000), the issue of the nature and direction of development becomes even more relevant. For the UN, the Global Fund may be the way to deal with Third World problems, but for the MNCs and the World Bank, the Fund is a route to assured markets and enhanced profits. Whether the Global Fund will contribute to better health remains doubtful, but better health contributes to the economy only when labour is gainfully employed. Disease may affect household economies but production breaks down only under large scale disruptions such as crop failures, rising raw material prices, and epidemics. The low productivity of undernourished workers is notional as work output per unit body has been shown to be constant, and habitual status plays an important role (Satyanarayana: 1979). Furthermore, produc-

tive work requires more skills and proficiency than pure muscle power and long hours of work.

It appears then, that the international effort has little to do with the health of the poor in the Third World and more to do with the needs of the MNCs, international trade, new forms of finance capital, and the strategies of imperialism. Wars were good business once but they are blatantly destructive and difficult to justify. Health and disease are far more attractive as socially and economically legitimate opportunities. Therefore, they must be transformed from social into individual problems, which markets can resolve through commodified services so that capital may grow. This vision for health in the 21st century needs to be challenged with innovation and creativity. For instance, the introduction of peace studies in the medical curriculum has been initiated by the University for Peace in Costa Rica, debated in Japan and Thailand, but has yet to reach South Asia. Organisations like International Physicians for the Prevention of Nuclear War, Physicians for Social Responsibility in the US, and Indian Doctors for Peace and Development are trying to build an anti-imperialist consciousness. The question is, do the majority of the professionals see the injustice? And if they do, can they assert themselves to retrieve the concept of public health offered by Alma Ata and begin to put the pieces together all over again?

Table I : Poverty Profile of South Asia

Countries	\$ 1 a day (1989-94)	HPI (1995)	POPI (1995)
Pakistan	12	46	44
Nepal	53	-	52
Bangladesh	29	47	46
India	53	36	38
Sri Lanka	4	21	27
South Asia	45	38	39.5

Source: Haq 1998a, UN 1994; UNDP 1998a; UNICEF 1999; World Bank 1998q; and HDC staff calculations.

Table II
Social and Economic Indicators of Development

S.No.	Countries related development Index Rank	Gender education expenditure % of total Govt. expenditure 1995-97	Public levels Pre-primary and primary 1995-97	% of all share present 20%	Inequity growth rate % 1990-99	GDP Total 1999	Investment As % of GDP 1989	Public expenditure on health as % of GDP 1998	Military expenditure as % GDP 1999
1. Sri Lanka	70	8.9	-	8.0	4.0	2514	1.6	1.4	3.6
2. India	105	11.6	39.5	8.1	4.1	1484.4	0.3	1.4*	2.4
3. Pakistan	117	7.1	51.8	9.5	(1.3)	732.0	1.3	0.9	4.4
4. Bangladesh	121	13.8	44.8	8.7	3.1	1203.1	2.6	1.7	1.6
5. Nepal	120	13.5	45.1	7.6	2.3	343.7	6.9	1.3	0.9
6. Bhutan	-	7.0	44.0	-	3.4	66.6	15.1	3.2	-
7. Maldives	69	10.5	-	-	3.9	30.7	-	5.1	-

Source: Human Development Report 2001, Making New Technologies Work for Human Development.

* Sonya Gill and Kavadi. Shirish N. (1999): Health Financing and Costs, Pune, FRCH; p.20.

Table III
Public Health Indicators

S. No.	Countries	Population using adequate sanitation facilities % 1999	Population using improved water sources % 1999	Under nourished people (as % of total population 1996-98)	Life expectancy at birth	Infant mortality rate (per 1,000 live births) 1999	Under five mortality rate (per 1,000 live births) 1999	Maternal mortality ratio reported (per 100,000 live births) 1980-99
1.	Sri Lanka	83	83	25	65.1	17	19	60
2.	India	31	88	21	50.3	70	98	410
3.	Pakistan	61	88	20	49.0	84	112	-
4.	Bangladesh	53	97	38	(44.9)	58	89	440
5.	Nepal	27	81	28	43.3	75	104	540
6.	Bhutan	69	62	-	43.2	80	107	380
7.	Maldives	56	100	-	51.4	60	83	350

Source: Human Development Report 2001. Making New Technologies Work for Human Development.

Table IV
Burden of military expenditure in South Asia

Indicators/Countries	As a % of GDP		As a % of central government expenditure	
	1985	1994	1997	1994
Bangladesh	1.3	1.5	1.8	17.6
Bhutan	n/a	n/a	n/a	n/a
India	2.6	3.6	3.1	12.8
Maldives	n/a	n/a	n/a	n/a
Nepal	0.8	1.1	0.9	5.9
Pakistan	5.2	7.0	5.3	26.9
Sri Lanka	2.7	4.7	5.1	16.8
South Asia	2.4	3.4	3.2	14.7

Source: Haq 1999

Table V
Trends in military expenditure and armed forces, 1960-1990

	1960	1970	1980	1990
Public Expenditure (billion 1987 US \$)	322	454	549	676
World	295	395	447	557
Developed countries	27	59	102	119
Public Expenditure (percent of GNP)	5.7	4.8	4.3	3.8
World	5.9	4.8	4.2	3.7
Developing countries	3.9	4.6	4.6	3.9

Source: Sivard, R.L. *World military and social expenditure 1993* (Fifteenth edition).

Washington, D.C: World Priorities, 1993, p. 42.

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VIOLENCE AND MENTAL HEALTH

Dr N N Wig

The use of force and violence seems to be increasing in our society. There is a big change in the attitude of the public that now seems to accept violence as a legitimate way for achieving one's goals. In our anger, hurting innocent victims no longer seems to disturb us. Every day we read in newspapers reports of terrible sufferings of innocent people, may it be in Jammu & Kashmir, Gujarat or other parts of India.

As a psychiatrist, I feel very upset because I have seen from close quarters the effects of violence on the physical and mental health of the individual. I have also seen the social impact of violence on families and society in general.

Types of Violence:

Violence is a form of behaviour in which there is intention to hurt or kill somebody. It can be physical as well as psychological. The effects of psychological violence by humiliating or harassing an individual can be as devastating as physical violence.

Violence comes in many forms. Perhaps the least noticed and talked about form is the violence in the home setting. Beating of women is very common in many communities. In a recent issue of *The Tribune* (Her World, Sunday April 14, 2002) Leena Prasad has reported that almost every six hours, some where in India, a young married woman is burnt alive, beaten to death or forced to commit suicide. Lesser forms of beating and humiliation are suffered in silence and hardly reported.

Violence in our streets is rapidly increasing. Every day one reads about cases of robbery, dacoity, chain-snatching, kidnapping, and shooting in gang wars of the underworld. The effects of violence are much worse in areas where militancy is rampant - like Jammu & Kashmir, parts of the North-East, Andhra Pradesh or Orissa. Equally damaging are caste wars in Bihar and other

parts of the country. In Punjab we witnessed a terrible phase of violence during a decade of militancy in the 1980s.

Perhaps much worse than all this is the sudden violence which is unleashed during communal riots, may it be in Delhi (1984) Or Bombay (1992) or Gujarat this year, resulting in a huge loss of life and property and doing incalculable harm to the emotional life of large sections of the population. One should also not forget the kind of violence which results from the State's suppression of various riots and militancy movements. The most extreme form of State-sponsored violence is, of course, WAR in which these days the targets are not only the armies but also the civil population. Lastly, one special type of violence used against the individual by the authorities in power is the deliberate physical and mental torture to obtain information or to force a person to change his or her views.

The Size of the Problem:

Violence does enormous harm to health. The WHO World Health Report 2001 has mentioned that over 520,000 people died of violence (intentional injury) in the world in the year 2000. In addition, 310,000 died in various wars. About 815,000 people committed suicide.

Violence constitutes the sixth leading cause of disability in males between the ages of 15 and 44 years. The WHO has estimated that there are over 50 million refugees in the world. The physical and mental health of the refugees is a major health problem of our times.

Common Impression:

In the public mind there is a common impression that mentally ill persons are violent. In fact, very little of the total violence in the world is done by the mentally ill. Most of the violence in the world is done by people who are considered 'sane' rather than by those who are called mentally ill or "insane". The violence done by the mentally ill is of limited nature. On the other hand, society is often much more violent to the mentally ill - physically and mentally maltreating them, taking away their human rights and depriving them of ordinary facilities of

life. Last year, in Erwadi, Tamil Nadu, we saw the grim tragedy in which 25 mentally ill persons were burnt alive while sleeping with iron chain in their legs.

The Effect of Violence on Mental Health:

As a Psychiatrist, I regularly see the effect of violence on the health of the individual. It may be domestic violence or social violence or torture. I see many cases in which violence has led to states of anxiety, depression, unexplained fear and panic, physical symptoms of various kinds not responding to treatment, sleeplessness, agitation and so on. Sometimes, depression is so severe that it leads to an attempt at suicide. In such circumstances many patients resort to drugs and alcohol.

One special type of syndrome seen in these cases is what is called Post Traumatic Stress Disorder (PTSD). In this condition, after same exceptionally painful experience of violence, torture, war, riots etc. a person goes into a morbid psychological state in which there are repeated flashbacks of painful experience. For example, to a victim of torture even a picture of torture in a newspaper is enough to start panic reaction. His/her entire life is changed. A person is unable to relax and enjoy life as he used to do before. There are repeated bouts of anxiety, panic and depression with inability to work or sleep properly.

The Social Impact of Violence:

In any large-scale strife, war, militant movement, or in riots, hundreds of people die. Children are orphaned; women are raped and humiliated. It has a terrible social impact. The children who have lost their parents easily fall prey to a life of crime, violence and drug addiction. In a way violence breeds more violence.

One of the worst sufferers in any conflict are young children. A recent UNICEF report, "Psychosocial Assessment of Children Exposed to War-related Violence in Kabul – Afghanistan" by Dr L Gupta (1997) graphically describes how children had been emotionally traumatized by war events. About 41 per cent had lost one or more parents. Over 90 per cent children expressed the fear of dying in conflicts. Over 80 per cent felt that they

could not cope with the events and thought that life was not worth living. Many complained of different kinds of bodily and psychological symptoms.

Personal Experience of War and Strife:

I have served in the World Health Organisation for eight years - from 1984 to 92. I was mental health adviser in the Eastern Mediterranean Region covering 22 countries - from Pakistan to Morocco, i.e. the whole of West Asia and North Africa. Unfortunately, in my time, many countries in this region were having armed conflicts. I have traveled in warlike situations in Iran, Iraq, Afghanistan, Kuwait, Palestinian refugees camps in Jordan, etc. I have seen terrible effects of such conflicts on the mental health of people.

My most powerful and distressing experience was in Yugoslavia where I went as a special WHO consultant for three months in 1993 to report on the effect of war on mental health services.

I visited almost all the successor states - Slovenia, Croatia, Serbia, Bosnia-Herzegovina etc. I was probably the first foreign psychiatrist to reach Sarajevo in Bosnia in 1993. It was a war zone. I had to go there wearing a helmet and a bullet proof jacket. I met many victims of violence and torture in hospitals. One case particularly stands out in my memory. A young woman was sitting in a corner with a strange sad, half smile on her face. To start a conversation, I asked her what her problem was.

She replied, through an interpreter: "You ask me what is my problem. You should ask me what is not my problem. I have lost my father, I have lost my family, I have lost my house, I have lost my job. There is nobody to live for and you ask me what is my problem". I apologised and requested her to tell me her story. In broken sentences, she told me the following story:

In the village where she lived, the police (of the opposite community) arrested her old father. In the evening a message came informing her that if she wanted to save her father, she must go and talk to the police chief. She knew the police chief who was in school with her but the times had changed. She went to the police station. The police officer made enquiries about her fa-

ther and then took her to an inside room. There were other men in that room. They tied her to a cot, put a blanket on her face and nine men, one after the other, raped her the whole night. She came home next morning. For the next two days she was like a statue - did not speak, did not eat, did not sleep.

On the third day she went into a state of frenzy, broke everything in sight in the house - TV, radio, glasswares, lights etc. In this state of excitement she was admitted to the hospital where I met her.

It was a stark example of how torture and violence damaged one's personality.

When I visited a large mental hospital in Zagreb I saw mental patients. Croats, Serbians and Bosnians were all living together in peace in the wards of the hospital while outside their countrymen were killing, raping and torturing one another. I wondered who should be called sane and who should be called insane!

What is the solution: I am conscious that there is no easy solutions to the problem of violence in society. It has existed since the beginning of history. It cannot be abolished but conscious efforts must be made to reduce it. This thought always puzzles me: Why do human beings derive so much satisfaction, and a feeling of superiority, after hurting and humiliating another human being? The hatred among groups is perhaps the root of violence. Even if we cannot love our neighbours, we must develop a degree of tolerance for them.

(Dr Wig is Professor Emeritus at the PGI, Chandigarh. This article is based on a lecture delivered by him at the annual conference of Indian Doctors for Peace and Development at Ludhiana in April 2002.)

Imagine

John. Lenon

Imagine there is no heaven
it is easy if you try
No hell below us
above us only sky
Imagine all the people
Living for today....

Imagine there is no countries
It isn't hard to do
Nothing to kill or die for
And no religion too
Imagine all the people
Living life in peace....

You may say I am a dreamer
But I am not the only one
I hope someday you will join us
and the world will be as one.

Imagine no possessions
I wonder if you can
No need for greed or hunger
A brotherhood of man
Imagine all the people
Sharing all the world.

You may say I am a dreamer
But I am not the only one
I hope someday you will join us
And the world will be as one.

HEALTH PROTECTION IN INDIA AT THE DAWN OF 21ST CENTURY

Parduman Singh

1. Health - a Basic Human Right

Health has been accepted as a basic human right throughout the world by international organisations like United Nations Organisation (UNO), the World Health Organisation (WHO) and constitutions of nearly all the countries, because no nation or community can progress socially and economically without healthy citizens. Moreover, health protection is needed throughout one's life i.e. from birth till death.

2. Health Care During British Rule

In India, before independence and during British rule health facilities were nominal and that also in cities or district headquarters. Overwhelming majority of people living in villages had no health protection worthwhile. They depended on indigenous systems of medicines i.e. Ayurveda, Unani, Tibati and Siddha. Another more ancient health provider was the folk medical system, based on locally available flora, fauna and minerals. These systems were denied government patronage. No research or education was provided for these systems. These were practised only by illiterate or semi-educated Vaid, Hakims or Dais (nurses who were called for help when a child was to be born). These systems were suppressed due to political and economic reasons by the rulers. They brought the Allopathic system. The result of these chaotic conditions was wide spread epidemics and millions of people dying because of these epidemics and several curable diseases.

During the entire period of about two hundred years of British rule there was no National Health Policy (NHP) and no infrastructure was built in rural areas and urban slums where overwhelming majority of population lived and worked.

3. Health Care After Independence

Even after Independence, unfortunately the government of India did not formulate a NHP and the state governments did not create infrastructure required for health protection for all citizens in spite of Article 47 of the directive principles of state policy in our constitution, which came into force in 1952. The article states “*the state shall regard raising of the level of nutrition and the standard of living of its people for the improvement of public health as among its duties*” (emphasis mine).

4. World Health Slogan : Health for All

In 1978 the WHO convened a World Health Assembly (WHA) in Alma Ata in Kazakhstan - in the former Soviet Union. This conference gave a powerful slogan of “Health for All” by the year 2000 by establishing an effective and efficient public health care system for all citizens.

5. National Health Policy:

It was after this historic WHA in 1981 that the government of India constituted a joint panel of Indian Council of Medical Research (ICMR) and the Indian Council of Social and Scientific Research (ICSSR) to formulate a national health policy.

On the basis of recommendations of this joint panel the government presented a national health policy before the parliament in 1983 i.e. 36 years after attainment of independence. The NHP strongly advocated creation of an infrastructure for primary health care in villages and urban areas as well as creation of health related services such as safe drinking water, sanitation and nutrition and also for provision of essential drugs and vaccines and qualitative improvements in family planning services. Moreover, it stressed the provision of adequate training and medical research. The objective was achievement of ‘Health for All by the year 2000 AD’.

6. Infrastructure for Health Protection

A. In Rural Areas

(a) Pattern of Health Care infrastructure in Rural Areas

In pursuance of the above mentioned objectives it was decided to set up Sub Centers (SCs), Primary Health Centers (PHCs) and Community Health Centers (CHCs) in the rural areas. This three tier health care infrastructure was to be developed on the basis of population norms which were:

- (i) Sub Centres: Population norm in plain areas - 5000 and in hilly/tribal areas - 3000.
- (ii) Primary Health Centre: Population norm in plain area - 30000 in hilly/tribal areas 20000.
- (iii) Community Health Centre: Population norm in plain area 120000 and in hilly/tribal areas 80000.

A sub centre was to be manned by one male and one female multi-purpose health worker [or Auxiliary Nursing Midwife (ANM)]. Upto the year 2000 1,37,271 sub centers were set up.

A primary health centre was to be manned by a medical officer supported by the para-medical and other staff. Up to the year 2000, 22975 PHCs were set up. The PHC was to have 4 to 6 beds for indoor patients. It was to act as a referral centre for 6 SCs.

A community health centre was to be manned by four medical officers/specialists, a Surgeon, a Gynaecologist, a Paediatrician supported by 21 paramedical and other staff. It was to have 30 beds for indoor patients. It was also to have an operation theatre, an X-ray machine, a labour room and laboratory facilities. It was to act as a referral for 4 PHCs. Upto the beginning of 2000, 2935 CHCs had been set up.

(b) Gaps in Infrastructure in Rural Areas

According to June 2000 bulletin on rural health statistics issued by the Directorate General of Health Services, government of India (GOI), the shortfall as per 1991 census in setting up SCs is 7420 and projected to be 22927, in PHCs 1622 and projected to be 4323 and in CHCs 2680 and projected to be 3553 by the year 2002.

The shortfall in staff according to the bulletin, in June 2000 was that 27874 SCs were without ANMs and 64590 without male

health workers and 1516 without any male or female health workers. Similarly 1463 PHCs are functioning without any doctor. Among the CHCs there is a shortfall of 1614 surgeons, 1841 physicians, 1652 obstetricians and gynecologists and 1970 pediatricians out of required strength.

B. In Urban Areas

Health care in urban areas is provided by hospitals attached with medical colleges, district hospitals, health posts, urban health and family welfare centres, municipal hospitals and dispensaries, charitable and voluntary hospitals under Employees State Insurance Scheme (ESIS) for workers employed in factories and establishments having 10 or more employees, dispensaries for central government employees under Central Government Health Scheme (CGHS), captive hospitals and dispensaries for railway employees, defense personnel, paramilitary, central security forces and some dispensaries for postal employees as well as very large number of private hospitals and clinics which are increasing at a fast rate.

Urban Health Revamping Scheme

Apart from the existing health care infrastructure in urban areas, in order to improve public health care in urban slum areas, an urban Health Revamping Scheme was launched in 1984. The scheme envisaged the creation of a network of health posts of four categories based on population but subsequently the Ministry of health and family welfare modified the scheme to have a single type for population of 50,000 persons. The staff in the health post was to be one medical (lady) officer, one Public Health Nurse (PHN), Lady Health Visitor (LHV), 5 ANMs, one clerk, one female attendant and one sweeper-cum-chowkidar.

Urban health posts were expected to function in coordination with Urban Integrated Child Development Service Centres and Urban Basic Services in the respective areas. But only 936 health posts were sanctioned by the Ministry of health and family welfare during the period 1983-84 to 1988-89. The state government sanctioned only 871 and 10 family welfare bureaus. Since then no additional health post has been sanctioned. Only in

metropolitan cities of Kolkata, Mumbai, Chennai, Bangalore, Hyderabad and Delhi funds have been provided to establish health posts for slum areas. The central government did not provide funds for expansion of the program in medium sized cities. Thus the scheme has been practically a non-starter.

7. Functioning of Public Health Care System in Rural Areas

Apart from shortage of doctors and paramedics - even the gaps in the sanctioned strength are not filled for years. The attitude of many doctors posted in rural areas particularly is to say the least, unethical and against the Hippocratic oath that a doctor takes at the start of his career. Most of the doctors are not available at the PHCs. They usually go once in a month, mark their presence for even the days of absence and draw fat salaries (especially after the 5th pay commission recommendations accepted by the government). Thus they violate the conditions of service by indulging in private practice, which is banned in most of the states. This forces the poor people to go to private clinics and hospitals, which charge huge amounts, forcing the poor to raise loans, which they are unable to pay and all this results in destitution.

In addition, there is non-availability of ANMs as well as of life saving medicines in the SCs and PHCs. According to a study undertaken by the National Family Survey 1995:-

- (a) 16 percent of the pregnant women delivered children in health institutions while 84 percent at home helped by untrained nurses.
- (b) 42.4 percent of pregnant women in rural areas did not get any antenatal or postnatal care.
- (c) 47.5% of the mothers reported that their children were not vaccinated against any of the six preventable diseases.
- (d) There is general non-availability of medicines even of life saving drugs in most of the PHCs and SCs.

The NF survey concludes "All the above findings broadly indicate that the health services provided in the rural areas by the government are grossly inadequate".

8. Functioning of Public Health Care System in Urban Areas

(a) Bias in the Health Care Facilities

In spite of the concentration of health facilities in the urban areas as compared to rural areas and the relative proximity of hospitals and other medical facilities, the standard of health care for slum dwellers, squatters, residents of Jhugies and Jhompries (hutments) as well as other poor and lower middle class residents in the urban areas, falls far below the reasonable minimum levels. Urban health care is generally biased in favour of persons in high income groups and in favour of organized sector employees of government and public sector undertakings.

(b) Levy of User Charges in Government Hospital

The inadequate health care for poor sections of the people has further worsened because of levy of heavy user charges in most states. The poor sections of the people and slum dwellers cannot bear this burden. Hence they are forced to go to unregistered medical practitioners, quacks and even owners and employees of chemists and druggists for treatment.

The poor people in urban areas live in unhygienic accommodation, have inadequate safe water supply, practically have no proper sanitation facilities and huge quantities of solid waste in clogged drains. On top of all this the inadequate health facilities have resulted in reappearance of diseases, which had been controlled e.g. malaria and plague. Apart from this, people suffer from diarrhoea, respiratory and infectious diseases, Tuberculosis, gynaecological disorders, sexually transmitted diseases and socio-psychological problems like drug addiction, alcoholism, domestic violence and child abuse. The rapid spread of HIV/AIDS is a further potential threat.

9. Voluntary/Charitable and Private Health Sector

(a) Charitable Institution in Health Sector

Apart from public health sector, large number of hospitals and dispensaries are run by voluntary/charitable and private institutions i.e. religious institutions, Christian missionaries, charitable trusts set up by rich families and welfare and cooperative societies or by individuals and big business houses. The number of

hospitals run by voluntary/charitable and private institutions is very large. in fact, according to the figures given by ministry of health and family welfare in their publication Health Information, at the end of 1996 out of a total of 15097 hospitals 10298 i.e. 68.35 percent are run by these institutions. These hospitals account for 36.6 percent of beds i.e. 228155 out of a total of 623819 beds.

Similarly out of a total of 28255 dispensaries 17131 that is 60.7 percent, are run by these institutions. These account for 10531 beds out of a total 25182 beds i.e. 41.9%.

(b) Private Hospitals and Nursing Homes

There has been a phenomenal growth in private clinics, dispensaries, hospitals and nursing homes in the last two decades. The boom started in the eighties and is expanding rapidly. To start with, these hospitals were concentrated in cities but now these are coming up in rural areas in a big way.

This growth is due to non-availability of public health care to most of the people as well as the desire to have best care by upper middle and rich classes of people or even lower middle class sections who, because of imposition of heavy user charges and non attendance of doctors and paramedics in spite of fat salaries and non practicing allowances of in government hospitals and long distances of hospitals from their homes, are forced to patronize these private institutions, putting a heavy burden on their meager incomes. Moreover, provision of private medical care is one of the most profitable propositions as these institutions charge heavy room rents, nearly equivalent to the rents charged in three star or five star hotels. They manage to get part time services of big experts i.e. retired from big government hospitals and medical colleges in various fields who charge heavy fees. Also they charge nursing fees etc. many have opened diagnostic centers in the hospitals where heavy charges are taken for various tests. This sector is bound to grow further because of various factors as well as government policies.

10. Indigenous Systems of Medicine

Before the advent of British rule, the people of this country who

lived mostly in villages, depended solely on Indigenous systems of medicines:

- * The Traditional Folk System.
- * The Ayurvedic System.
- * The Sidha System.
- * The Unani System.

The British rulers, due to their own political and economic interests discouraged and suppressed the indigenous systems and supported and encouraged the allopathic system of medicines.

Even after independence the prejudices spread by the British against these systems of not being scientific persist even among the Indian medical establishment and in the upper classes of society. The government of India even now allocates only 4% of national health budget for the development of these systems.

In spite of all this bias and lack of government support millions of poor people in villages and cities patronise these systems because of low cost and nearby availability. According to the annual report of the ministry of health and family welfare for the year 1999-2000, there are 2854 hospitals with 49353 beds and 22735 dispensaries of mainly Ayurvedic and Unani Systems in south India. According to this report there are 609400 Registered Medical Practitioners(RMPs) under these systems out of total 1000000 (ten lakhs).

Acceptance of Indian Systems of Medicines Internationally

Whereas in India the indigenous systems are still not getting enough government support, in the west, particularly in USA, people are turning towards these systems due to the fact that modern system is becoming prohibitively costly as well as due to side effects of these systems. According to study undertaken by the prestigious Harvard Medical School in 1991, 36 percent of the sample surveyed had tried alternative systems of medicines. In 1997 this percentage increased to 46 percent. The recent study was published in the Journal of American Medical Association. According to this study an estimated annual spending of \$ 27 billion on alternative systems of medicine was spent

(1997 figures) and said that nothing can stop this new trend. At present the demand for alternative systems of medicines in form of herbal medicines, massages, megavitamins and folk remedies is growing. There is a similar trend towards Homeopathy. Realising the growing demand, the US Congress allocated \$ 50 million in 1999 for establishing a National Centre for Complementary and Alternative Medicines. Textbooks on the subject are already available in the USA.

The alternative systems of medicines are also becoming popular in the countries of European Union particularly in Germany.

The global market of these medicines is estimated at \$62 billion; of this EU has a share of 50 percent. The WHO has projected a world market of \$ 5 trillion by 2050.

In these circumstances if India has really to achieve the slogan of "Health for All" in the 21st century, considerable attention and resources have to be devoted to the indigenous systems of medicine. There is a general feeling that the allopathic system is based on scientific principles while the indigenous systems are unscientific and irrational. The indigenous systems need for revamping on rational basis for proper research and development. In doing so the GOI has to play a pivotal role.

Urgent steps have to be taken in the areas of:-

1. Research and documentation.
2. Setting up of national and international training centres. Substantial increase in educational institutions teaching the indigenous systems.
3. Creation of parallel infrastructure for practice of these systems.
4. Standardisation of drugs.
5. Conservation of plants.
6. Securing patents both for plants and drugs and fighting the international multinational corporations from getting patents of essential indigenous drugs by changing the name of the drug.

11. At the Dawn of 21st Century Public Health Care in India is in Shambles

The independent commission on health setup by Voluntary Health Association of India (VHAI), which after an intensive study undertaken by it throughout the country has reached the conclusion that:

“numerous studies have revealed that both the rural and slums population all over the country are totally frustrated with the health services provided to them by the government”.

Even the minister for health and family welfare, government of India in an interview to the press in August 2000 frankly conceded that the primary health care in northern states (where a big majority of people of the country live) has collapsed.

The final verdict in this regard has been given in the new NHP - 2002' announced by government of India after nearly 20 years since the first NHP was announced in 1983 in which the slogan of 'Health for All by the year 2000' was given:

Though in figures a large infrastructure for health care has been built in rural areas by the year 2000 i.e. 137271 Sub Centres, 22975 PHCs and 2935 CHCs, but only very small in urban areas i.e. only 1807 health posts. The NHP 2002 states *“the decentralized Public Health Service outlets have become practically dysfunctional over large parts of the country. (emphasis mine)*

One of the major reasons for this state of affairs given in the new policy is the resource crunch. Government expenditure on health care is only 0.9 percent of the GDP and in the states it is only 5.5 percent of their budgets. Infant mortality rate per 1000 in India is 70 (the goal set in 1983 was to bring it below, 60 from 125). It is still very high as compared to China where it is 33 and in Sri Lanka where it is 16 (These figures are given in the NHP).

Thus the present state of affairs in respect of health care especially for overwhelming majority of people living in lakhs of villages and large slum areas is really pathetic, in spite of the fact that it is universally recognised that good health of the citi-

zens is absolutely essential for continuous development in all spheres of life in a country.

12. New National Health Policy

In this situation the government of India has announced new National Health Policy 2002. Although under the heading "Objectives of NHP", it is stated, "the main objective of the policy is to achieve an acceptable standard of good health amongst the general population of the country. The approach would be to increase access to decentralised public health system by establishing new infrastructure in deficient areas and by upgrading the infrastructure in the existing institutions." - a laudable objective indeed - but under the heading "Role of Private Sector" it is stated that *"In principle this policy welcomes the participation of the private sector in all areas of health activities - primary, secondary and tertiary"* (emphasis mine).

This policy will also encourage the setting up of private insurance instruments for increasing the scope of the coverage of the secondary and tertiary sectors. Private health insurance will be self financed. The policy further states that "In the context of the very large number of poor in the country (estimated to be 44.2 % of the population in another part of the policy) it would be difficult to conceive of an exclusive government mechanism to provide health services to this category.

The new Health Minister in a recent speech called for the active participation of corporate hospitals, medical professionals and NGOs in over coming the challenges of health sector.

Thus the main thrust of NHP is towards privatisation of health services, which will be ruinous for the poor people of this country. Already heavy user charges have been imposed in government hospitals and the charges of private hospitals are exorbitant not within the reach of what to say of the poor but even of the middle class. Health care is thus bound to suffer.

13. Health Protection in South Asian Countries.

In the UNDP's Human Development Report 2002 a comparison has been made of different aspects of commitment of Health Service and Resources as under shown in the tables :

Table I : Commitment of Health Service & Resources

Human Development Index Rank	Name of the Country	Population using adequate Sanitation facilities	Population using improved Water sources	One year old fully immunised		Births attended by skilled health staff	Health Expenditure		
				Against T.B	Against Measles		Public as % of GDP	Private as % GDP	Per capita U.S \$
		%	%	%	%	%			
72	Fiji	43	47	95	75	100	2.9	1.4	86
89	Sri Lanka	83	83	89	80	81	3.3	1.4	153
124	India	31	88	68	50	42	0.9	4.2	
127	Mynamar	46	68	88	85		0.2	1.6	97
138	Pakistan	61	88	78	54	20	0.7	3.1	18
140	Bhutan	69	62	90	76		3.2	3.6	36
142	Nepal	27	81	86	73	12	1.3	4.2	11
145	Bangladesh	53	97	91	71	12	1.7	1.9	12

Human Development Report 2002, UNDP

Table II : Commitment of Health Service & Resources

Name of the Country	Under Nourished people of total population	People living with HIV/AIDS			Malaria cases per 100000 people	Tuber culosis cases 100000 people	Life expectancy at birth years		Infant Mortality rate per 1000 live births
		Adults % age 15-49	Women age 15-49	Children age 0-14			1970 to 1975	1995 to 2000	
Fiji			0.07	100		24	60.06	68.4	50
Sri Lanka	23	0.10	74.00	100	1111	38	65.1	71.0	65
India	23	0.79	150000	170000	193	123	50.3	62.3	127
Mynamar	7				225	44	49.3	55.8	122
Pakistan	18	0.11	16000	2200	58	14	49.0	59.0	117
Bhutan		0.10			283	57	43.2	60.7	156
Nepal	23	0.49	14000	1500	33	117	43.3	57.3	165
Bangladesh	33	0.10	3100	310	40	62	44.9	58.1	145
									18
									17
									69
									78
									85
									77
									72
									54

Human Development Report 2002, UNDP

From these figures it is evident that India compares poorly with much smaller countries in South Asia in respect of population using adequate sanitation facilities, immunization of one year old, birth attended by skilled staff, expenditure on health care, people living with HIV/AIDS, malaria cases per 100000 people and infant mortality rate per 1000 births.

14. Challenges in Health Protection in 21st Century

From the foregoing narrative of the situation of health protection in India at the dawn of 21st century, inspite of article 47 of the constitution of India directing the government to provide public health to all its citizens, inspite of goals set in the NHP 1983 duly approved by the parliament and inspite of accepted basic principle of governance throughout the world that without education and good health no country can develop in economic and social spheres, the situation in the country is nothing to be proud of and in fact it is pathetic as far as poor or even lower middle class people are concerned.

Apart from the existing dismal situation, the immense and continuous increase in private hospitals, nursing homes and clinics, governments' open advocacy of privatisation of health care in the NHP 2002 in all areas of health activities i.e. primary, secondary and tertiary and imposition of heavy users charges in government hospitals, the provision of health care for millions of people living in lakhs of villages and in ever burdening slums in the cities is going to deteriorate further. This will adversely affect the development of the country. It is a great challenge before the people of the country and the government.

On the other side reappearance of lethal epidemics which had nearly been controlled e.g. malaria, plague etc. as well as new generation diseases like asthma, chronic bronchitis due to continuous pollution, increase in mental diseases due to stress and strains of modern life as well as due to increase in population with no corresponding employment opportunities, old age diseases such as arthritis, alzheimer diseases etc. is a big challenge.

In any welfare state, the government is duty bound to provide education, public health care, safe drinking water but the future

in this regard is not very bright for the poverty ridden people of this country.

Therefore, that is the biggest challenge before the central and state governments, Parliament and state legislative assemblies, political parties, organisations of workers, peasants and agricultural workers, women, students & youth organisations, the NGOs and particularly the medical fraternity i.e. the doctors and paramedics to combine together to face the challenge and try their level best to provide efficient public health service to the underprivileged poor and lower middle class people by the year 2025.

Privatising Health Care

I. The BJP led NDA government in its budget for the year 2003-04 made it abundantly clear that it is out to privatise health care in this country. In the NHP 2002 it declared that “In principle this policy welcomes the participation of private sector in all areas of health activities – primary, secondary and tertiary. This principle is sought to be implemented in the budget by not increasing even the customary ten per cent on account of inflation and by imposing cuts in the current allocations”.

Further the budget proposes to extend the benefits of section 10(23G) of Income Tax Act to such financial institutions, which provide long term capital to private hospitals with 100 beds or more that is the big monopolists. Big private hospitals have been offered several other concessions.

Apart from these provisions in the new budget, almost all state governments have levied exorbitant user charges in all government hospitals making it impossible for poor sections of society to have treatment in these hospitals.

The policy of privatization of health care is being practiced for several years especially after coming in power of the BJP led NDA government. The new health and family welfare minister Ms. Sushma Swaraj has publicly declared that “The nation cannot provide health services for all”. This declaration is in total

violation of article 47 of directive principles of state policy in our constitution which states that “*The state shall regard raising the level of nutrition and the standard of living of its people and the improvement of public health as among its duties.*” (emphasis mine).

Instead of improving public health care provided by the Government, the BJP led NDA government has decided to dismantle the existing public health care system.

II. It was only after a clarion call of “Health for All by the Year 2000” was given by the Alma Ata World Health Assembly convened by the WHO in 1978 and for establishing an effective and efficient public health care system for all citizens that the GOI for the first time after independence, formulated a NHP in 1983 which was later approved by the parliament. This policy strongly advocated the creation of an infrastructure for health care in villages and urban areas as well as creation of health related services such as safe drinking water, sanitation and nutrition as also for providing essential drugs and vaccines and qualitative improvements in family planning services. The objective was achievements of health for all by the year 2000 AD.

Accordingly over the last 20 years a large infrastructure for public health care had been built up by the year 2000 which according to the NHP 2002 consisted of 137271 SCs, 22975 PHCs and 2935 CHCs in villages and a very small number of 1807 health posts in urban areas. But due to policies of Central Government and its heartless apathy towards the poor people of this country, the new NHP 2002 of BJP led government unashamedly states “*the decentralized public health services have become practically dysfunctional over large parts of the country.*” (emphasis mine). One of the reasons given in the new policy is resource crunch. Compare this crunch over jumbo size central council of ministers – their salaries, allowances and other perks of free medical care in the costliest private hospitals and even foreign countries, free travel, free telephones etc.

III. In the UNDP's Human Development Report 2000 expenditure on public health as percentage of GDP is given.

Country	Percentage
India	0.9 %
Fiji	2.9 %
Sri Lanka	3.3 %
Pakistan	0.7 %
Bhutan	3.2 %
Nepal	1.3 %
Bangladesh	1.7 %

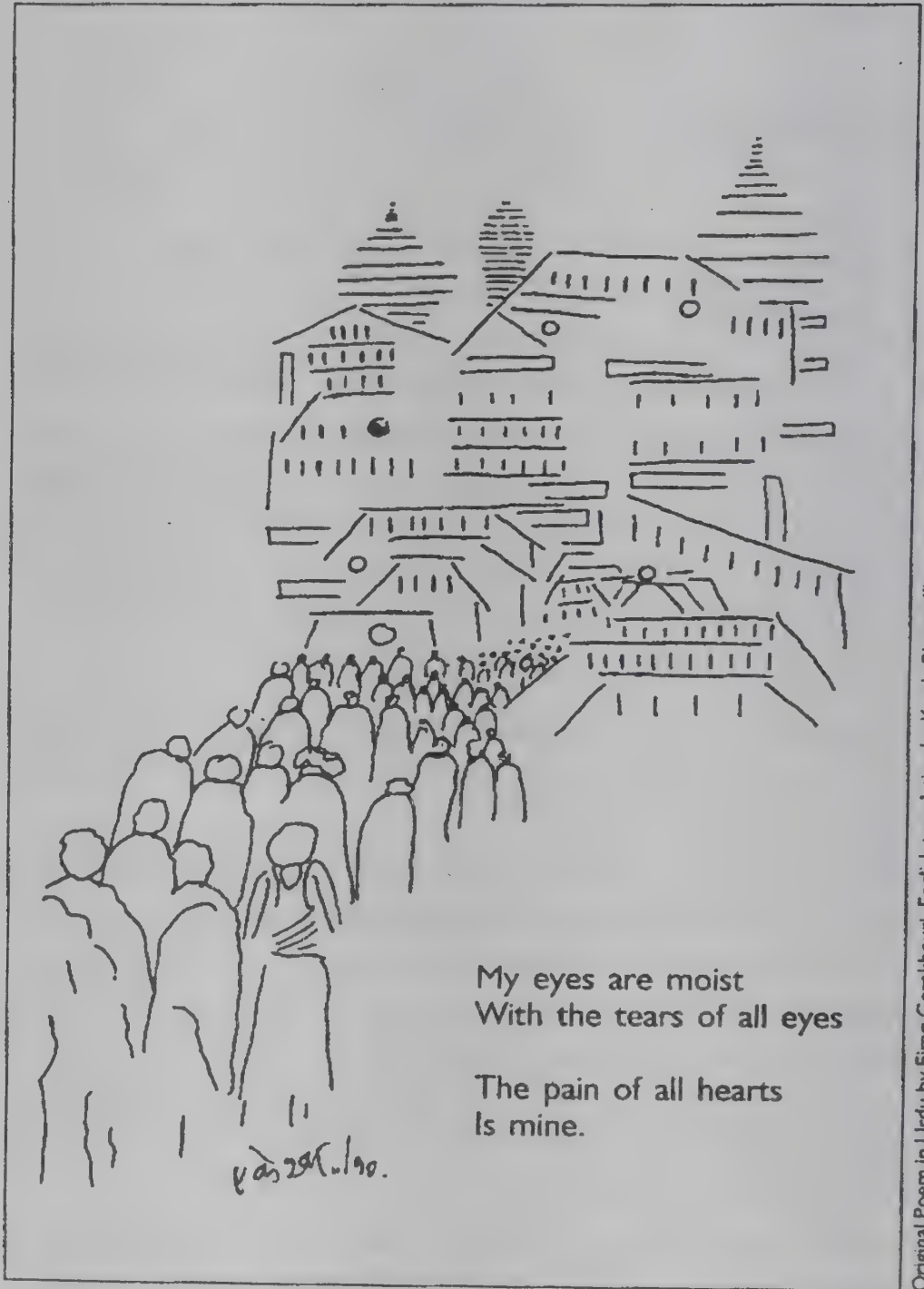
(Comparison in SAARC countries has been selected)

The result of this shameful state of affairs is continuous increase in the number of private hospitals, nursing homes and clinics where the cost of treatment is so high that only rich people can take treatment. The poor, estimated to be 44.2 percent of population by the NHP 2002, are left at the mercy of quacks that is the unqualified private medical practitioners.

IV. The final blow on the public health care has been struck by the BJP led NDA government in its new NHP 2002 and in the budget for the year 2003-2004.

V. This is the biggest challenge before all political parties, organizations of workers, peasants and agricultural labourers, the NGO's for the sake of millions of poor people living in lakhs of villages and slums in urban areas, all these parties and organisations should forge broad unity so that the policies of this government can be defeated. In the ensuing assembly and parliament elections the provisions of cheap public health care should be a major slogan.

VI. Health has been accepted as a basic human right throughout the world by the WHO and constitutions of various countries. Without goods of health of the citizens no country can develop. Let us all unite to achieve this noble task.



My eyes are moist
With the tears of all eyes

The pain of all hearts
Is mine.

Original Poem in Urdu by Firaq Gorakhpuri. English translation by Kamla Bhasin. Illustration by Rajasthan Kisan Sanghatana.

Courtesy : Voices of Sanity

MEDICAL ETHICS IN SOUTH ASIA

Dr. Rashid-E-Mahbub

Physicians are often viewed as of demi-God and their decisions are taken as gospel truth without any doubt or misgiving. This imposes immense responsibilities on physicians to maintain an ethical, correct and honest approach in their dealing with the patient. But this is a challenge in the South Asia.

South Asia, a densely populated area in the world. Nearly 1.5 billion people live here. The population density in the region is already among highest in the world. The widespread poverty in some of the countries of this region poses a serious threat to health. Millions live in poverty and it has implications on health. Social welfare oriented state policies contributing to high literacy particularly of women and increased health awareness leading to improved health practices are headed. In the recent years average annual population growth rate has declined, life expectations has risen, infant mortality rate has decreased due to sustained immunization programs. Efforts are also on to control acute respiratory infections and diarrhoea diseases. This region is trying to eliminate leprosy and eradicateing Poliomyelitis.

But on the other side gap between the rich and the poor is increasing sharply. Access to the Medicare by the poor is difficult. There is an unequal distribution of Medicare services between the poor and the rich, the village and town and between men and women.

Changes have been observed in the life style of the people, family dynamics and health seeking behavior, in recent years due to improved information technology and globalization. From the traditional family, nuclear family is fast emerging due to rapid urbanization. The tradition of decision-making was rested in the eldest member of the family but it is not so in the nuclear family.

In the South Asia free health services are provided by the Government in its hospitals and dispensaries but comparable better services are available in the private sector. The private sector is costly and is beyond the reach of common and poor people.

In the public hospitals due to scarcity of beds, amenities and over crowdedness, the physicians have to constantly face the ethical dilemma in the choice of treatment and priority for admission. On the other hand duties of medical practitioners according to the code of ethics, malpractice and negligence were raised in the court of law under the law of torts or in the national penal code or in some countries under the consumer protection act. Human rights and health rights are also issues with the medical practice.

In addition advances in technology for assisted reproduction, organ transplantation, termination of pregnancy, drug trial, health research and bioethics, all are going to raise newer and different kind of ethical issues and dilemmas in South Asia.

In South Asia evidence of medical ethics is available in the Sushruta Samhita and Chrika Samhita. The Hippocratic oath was formulated much later during the Greek, Roman period which brought about a transformation in the entire concept of medical ethics. The Geneva declaration of Medical ethics was based on the ancient concept of ethics from the civilization of Babylon, Egypt, Greece, Persia and China.

The World Medical Association, at its third general assembly in Geneva, September 1948, adopted certain codes of ethics in the form of an oath to be taken by all the members of the profession at the time of entering the Medical profession. A year later, the association adopted a code of ethics which is popularly known as the international code of medical ethics.

Most of the member countries of South Asia are the signatory to the code and they follow this code for their physicians and the guidance of their national organization except Bhutan and Maldives. They are yet to have an independent national organization for this purpose. In addition to that most of the South Asian countries follow the International decla-

ration related to the ethical issues in health research. "Nuremberg Code 1947" byproduct of trial of physicians for having performed cruel experiments on prisoners and detainees during the Second world war "voluntary consent" was made absolutely essential.

Declaration of Helsinki – 1 was adopted by World Medical Associations 18th Assembly in 1964, on clinical research therapeutic and non therapeutic. Declaration of Helsinki-2 was adopted by World Medical Association 29th Assembly in 1975 which is a revision of Helsinki-1.

Regarding Bioethics an universal code of Ethics is in the table of the International bioethics committee of the UNESCO general assembly.

The laws on health and medical practice have been inherited from the British. These laws are the principal statute to regulate the grant of titles implying qualification of the modern medical science and to check the assumption and use of the Medical title by unqualified person. Most of South Asian countries by these laws have organizations and agencies to regulate control and govern the way physicians are supposed to perform their professional work by a code of ethics and etiquette.

All the countries of the South Asia except Bhutan, Maldives have their own councils. Functions are more or less the same. They prescribed the curriculum of the M.B.B.S. degree course. All medical graduates have to register themselves with the council. They should agree to abide by the codes declaration "I pledge to consecrate my life to the service of humanity. I will not use my medical knowledge contrary to the laws of humanity. I will maintain the utmost respect of human life from the time of conception". It also includes responsibilities of the physicians, professional service render duties of the physicians to their patients and to each other, to the public and the profession at large. In other way this code of ethics is divided into different sections. Each sector deals with different issues namely:

- ❖ *General principle*
- ❖ *Duties of physicians to their patients.*

- ❖ *Duties of physicians to their profession.*
- ❖ *Duties of the physician to another physician.*
- ❖ *Duties of physician in consultation.*

In the section general principle

- ❖ *guide to doctors on their behavior and responsibilities.*
- ❖ *on advertisement and terms of payment on professional service.*
- ❖ *on the issues of commission or gif's.*
- ❖ *Procuring of any patient.*

All these countries, have medical councils. In addition to see the public interest for registration of Doctor's qualification, they maintain disciplinary control over medical practitioner with regard to misconduct, negligence as well as behavior in their medical practice. They form a committee, against Doctors for the violation of ethical code or malpractice and maximum punishment they can provide is cancelling his registration for short time or permanently. But people prefer to go directly to the court or complaints with the employing authority or with the Government.

The teaching of ethics as a formal part of the curriculum is largely absent in South Asia. It is in the curriculum as part of Medical jurisprudence with one or two of formal lecture, where students have less interest as they consider the other subjects more important. But the students learn by following their teachers as role models. These senior doctors influence the behavior and attitude of junior doctors.

Regarding the Medical Ethics in research is dealt by separate organization the National Council of Medical Research. All the countries have such organization in South Asia except Bhutan, Maldives. The research concerned with the clinical, epidemiological and sociological aspects of health and disease and includes drug trials involving large numbers of volunteers and patients. In drug trial under the law needs permission from the appropriate authority for the clinical evaluation of the new drug. This all needs ethical guideline for

the safety of the public life, confidentiality, informed consent and others. An ethical review committee or ethical committee of the institution looks after all these.

Recently bioethical issues are coming up to the South Asia. Some have their laws and most of the states are yet to be sensitized on it.

The change in the South Asian Society in the social, political and economic field due to globalization and information technology, a lot many issues are confronting the society. These issues need consideration to frame the medical ethics.

There is huge economic difference between rich and poor. One can afford better medical facilities and others cannot. In villages and small towns some services are not available but these are available in big cities. Status and freedom of women is still to be upgraded. Population control, family planning devices bring the ethical issues. Modern diagnostic techniques like prenatal diagnosis of sex and subsequently female foeticide also brings ethics in question. The issues of organ transplant need to be ethically examined in order to prevent exploitation of the poor. Human rights, health rights are the new orientation which needs ethical consideration. New diseases like AIDS, SARS that depend on life support system raise ethical issues for its management. The Consumer Protection Act in some countries have changed the physicians practice of medicine, at least in the private sector due to bringing the physician-patient relationship as a trader consumer relationship. Political violence, torture in prison and subsequent health issue needs due consideration in the ethics.

Medical ethics in the South Asia have a long tradition but due to the colonial legacy and western medical ideology it has lost its own character. The colonial legal system inhabitation and medical acts adoption and teaching medical ethics in South Asia is still in infancy. They taught medical ethics in the department of forensic medicine emphasizing negligence and malpractice. They try to follow the professional conduct of their

senior rather than through reading books. Most of the countries have their medical councils but are not playing their role efficiently due to the lack of manpower, funds and attitude. But the ethics in research most of the countries have functioning by ethics review committees who evaluate the proposals for medical research for ethical implication.

But the changing socio-cultural realities and the issues bring the physician in ethical dilemmas that to be solved by structuring the medical ethics in the curriculum of Medical education, strengthening the medical council, sensitizing the physicians and upgrading the present laws.

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ECONOMIC COST OF ARMS RACE IN SOUTH ASIA

Dr Rakesh Datta

Justifying the expenses of defence as a first duty of the Government, Adam Smith, the British Defence Economist of the 18th Century wrote that the primary duty of a sovereign is to protect the nation from the violence and invasion of other countries and it can be performed by means of a military force. On the other hand, F.W. Hirst had written during early 20th Century that nation's expenditure must be sufficient to maintain its sovereignty and accord ample security against invasion; all excessive and provocative expenditure be avoided and suppressed. At the sametime, real efforts should be made to secure a proportional limitation of armaments.

Building up relations between Defence and Economics, Correlli Barnett's theory on 'Death of an Economy', in its application to the United States proves that its economy has the largest defence industry in the world and the very survival of American economy is dependent on it. So, if defence industry dies the US economy will perish too. During the middle of the past century there has been a rapid economic growth in the United States and other advanced countries of the world, bringing unprecedented riches and prosperity for their citizens, and maximum gains were from the selling of arms by introducing arms race amongst the nations considered less privileged.

President Dwight Eisenhower, in his farewell address in 1961 had said, "We have been compelled to create a permanent armament industry of vast proportion....This conjunction of an immense military establishment and a large arms industry is new in American experience. The total influence that of economic, political even spiritual is felt in every city, every state house, every office of the federal government."

During early times of industrial age arms merchants like Vickers of England, Krupps in Germany, Remington and Colts in US

and Dassault in France all profited when their countries went to war. They further gained when they sold arms to the various belligerents. The practice continues even today. With the exception of Japan, arms comprises a major proportion of the exports of every industrialized state with US, Russia and China leading in absolute terms.

In fact arms race is the most prominent and war-like form of competition between the states. It has been defined as intense competition between opposed powers or group of powers, each trying to achieve an advantage in military powers by increasing the quantity or improving the quality of its armaments or armed forces. Reciprocal anxiety has very often fuelled arms race. For instance, in 1914 the intelligence estimates of Germany and France reported exceeding number of troops mobilised against each other. Earlier, when England and Germany were engaged in naval arms race, each feared other for a possible pre-emptive attack. According to Edward Grey, the British foreign secretary, 'Great armaments lead of inevitably to war. The increase of armaments...produces a consciousness of the strength of other nations and a sense of fear'.

It is indeed ironic that a weapon free world is generally considered more dangerous than a weapon filled one. This is because so long underlying causes of personal, group, state instability and human inclination to resort to violence dominates, war will continue to haunt us. Woodrow Wilson in his fourteen points given at the end of World War-I recommended national disarmament for world considerations to the lowest point consistent with domestic safety. It suggested that States would be allowed to retain police force and nothing capable of threatening the other States.

However, the need for national security provides wide interpretation. A nation in its bid to raise the deterrence level justifies arming or even enter into arms race which could equally be perceived as damaging to national security. Painfully it may be, developing countries are being drawn intensively into arms race. While the emerging trends in world relations of displaying military strength (currently, Iraq being the case as victim) and simultaneous build up of arms not only increases the probability of any thermo

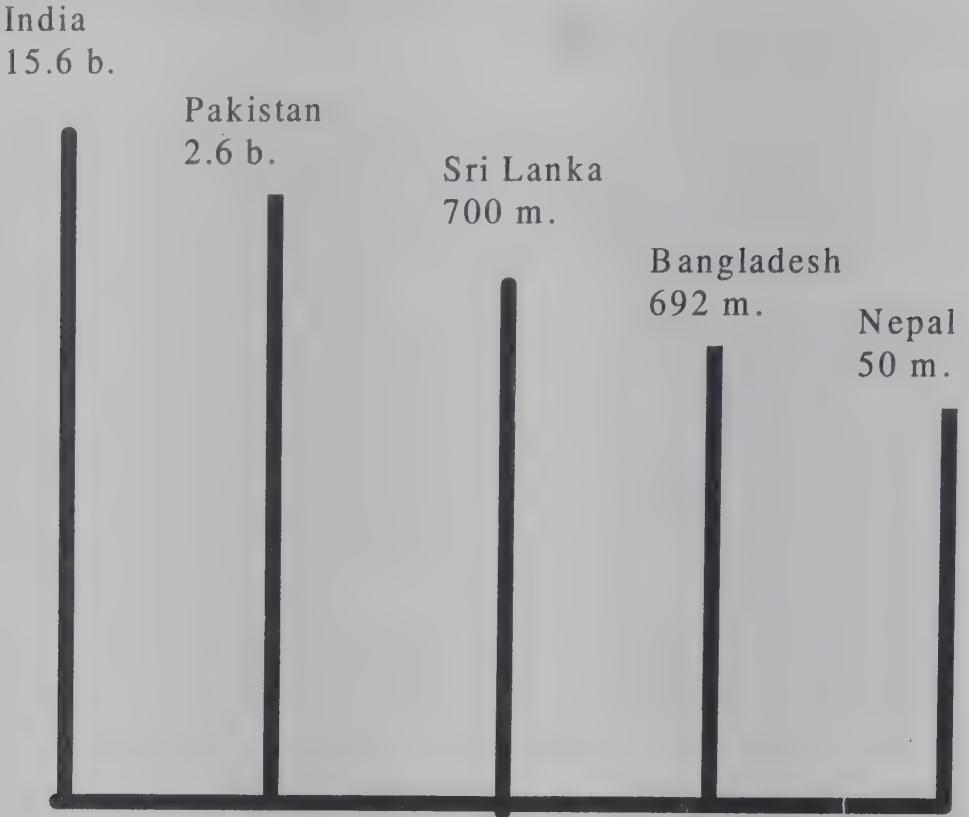
nuclear catastrophe but, also slows down socio-economic progress as a whole.

For instance, according to Stockholm International Peace Research Institute (SIPRI – 2002) world military expenditure in 2001 was estimated at \$ 839 b. accounting for 2.6 per cent of global GDP and world average of \$ 137 per capita. In this context, South Asian share over the period 1998-2001 had been 26 percent next only to Africa i.e. 31 percent. According to SIPRI, world military expenditure is concentrated in few countries in which 15 major countries account for over three quarter of the world total and 5 major for more than half of the total. This includes the United States accounting for 36 percent alone followed by Russia, France, Japan and the United Kingdom.

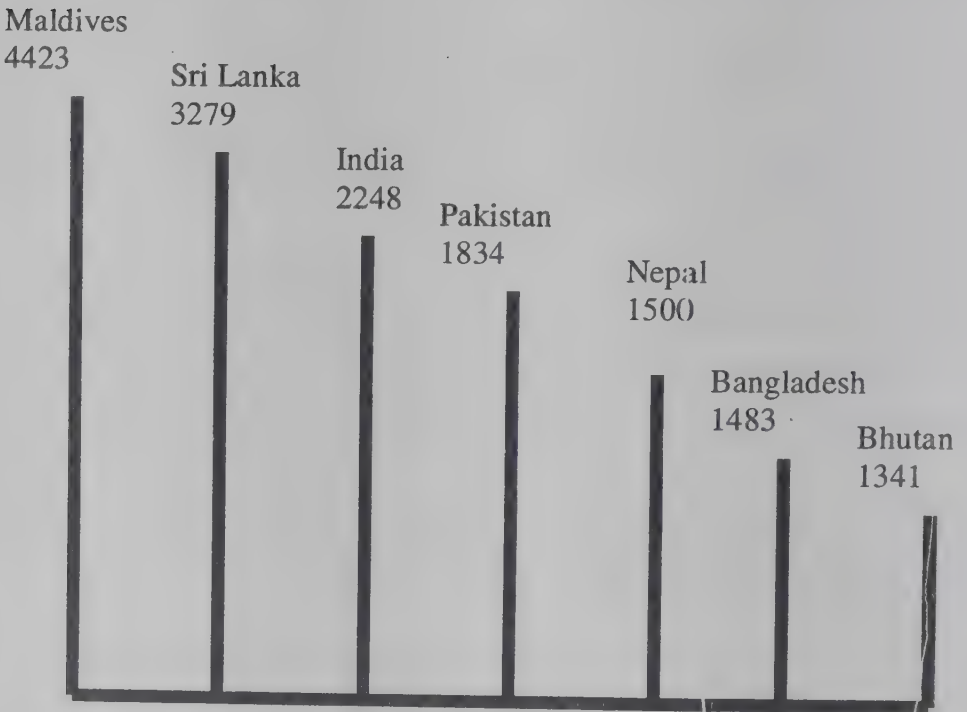
Amongst the regional powers India spends 72 percent of the South Asian military expenditure which accounts for 2 percent of world share while Chinese is 3 percent. In terms of GDP alone, Pakistan's share of military expenditure is 6 percent. Further with 54 percent increase over the last ten years and 26 percent increase during the period 1998-2001, South Asia is one of the regions with the most rapidly increasing military expenditure. This could be attributed to the effects of the conflicts and insecurity situation in the region. It includes conflict between India and Pakistan over J.& K. , the civil war in Sri Lanka, border problem between India, Bangladesh and Myanmar and Maoist rebellion in Nepal.

While the major part of the military expenditure is spent by the Western industrialised countries, the heaviest economic burden of the defence budget is on the developing nations with high level of poverty. For instance, around 1.2 b people i.e. one sixth of the world population subsist on less than \$ 1 dollar per day. Under such conditions even a world average defence burden of 2 percent substitutes a serious diversion of resources from the fulfilment of basic needs.

Looking at the defence budget of the countries of South Asia including their per capita income, India spends highest on defence with per capita income of \$ 2248. On the other hand, in terms of GDP Pakistan spends highest in the region which is 6 percent to India's share of an average of 3 percent.



Defence Budgets (in \$s) in South Asian Countries



Per Capita Income (in \$s) in South Asian Countries)

This only shows the deep economic and social consequences of defence spending which profoundly upset the order of de-

veloping priorities in terms of per capita income of a nation resulting into more lost opportunities than in the advanced countries. For example, during 80's the gap between advanced and developing countries in the rate of per capita income stood at 22 to 1 and resulted increasingly unfavourable influence on the international relations. The situations has not changed much looking at the current rate of per capita income of the United States of America, which according to the Statesmen year book, 2003 stands at \$ 31,872 and that of Russia \$ 7473 in comparison to total per capita income of South Asian Countries which is \$ 16108.

However, weaker the economic and industrial growth and heavier the burden of military expenditure, the stronger is its detrimental impact on the national economies as it involves direct deduction from the already low accumulation values.

Take the case of South Asian countries with 70 percent agrarian economy dominating to 20 percent of industrial growth. These countries present a bleak economic picture, where issues on defence and development continue to be debated with large overdoses of domestic compulsions and interests from the external quarters. According to Late Z.A. Bhutto, 'Pakistan's security and territorial integrity are more important than economic development'. This maxim has still been a guiding philosophy of the governing elite of present day Pakistan. The military and defence expenditure are more important issues and remain out of bounds for the civilian governments to tamper with or without the consent of army.'

There has been a calculated digression from the development measures ever since the countries of this region have become independent, to fielding political interests and broadly it has put economies of these countries on complete hostage inviting more contradictory postures than any functional participation.

In this context, arms import by Pakistan in late 50's eventually became a cause of arms race between India and Pakistan. The induction of arms by other countries, such as

Bangladesh, Sri Lanka, Nepal has more been to Chinese interests in these countries to counter Indian influence in the area. As far turning Pakistan into a strong American flank, Robert Mc Namara former American Secretary of State had said about Ayub Khan that it is beyond price to make friends of such men. Subsequently, during the period 1954-65, the US provided military grant assistance to Pakistan valued at \$ 650 m, defence support assistance at \$ 619 m and cash on commercial basis purchase worth \$ 55 m. Between 1953 and 1979 Pakistan received US economic and military aid to the tune of \$ 6b. Such forging of ties continued when Pakistan also became frontline state of America and arming of Pakistan became American obligation to that country.

China was another country which came to Pakistan's assistance as and when United States enforced sanctions restricting official arms supply to Pakistan. Later on China took the lead in supplying arms to Pakistan thereby putting India on constant tenterhooks.

India and Pakistan have for many years been large importers of major weapons be it tanks, aircrafts, submarines and rank amongst 15 highest importers of arms in the world. With the exceptions of few ballistics missiles none of the key weapons in Indian armoury is of country's origin. This is despite India's policy of establishing indigenous arms industry capable of boasting production of most advanced major weapons like failed Arjuna tank, pending LCA but for the few frigates produced to mention a few. In the period 1997-2001, India acquired 80 percent of its import from Russia which has always been willing to supply the advanced weaponry and transfer technology to India. The current in the series include T-90 tank, BROMOS missiles, SU 30 MKI and an aircraft carrier. Israeli supply has been mainly in the field of electronics.

On the other hand, Pakistan has a more modest arms industrial policy focussing largely on the production of light arms and assembly, maintenance and modification of major weapons it gets from China. Even their ballistics missiles are of Chinese and North Korean origin. Of late, both the countries have entered into nuclear arms race which has made South Asia a

most dangerous place in the world. It is because for the first time the two sworn belligerents who are also neighbours with active history of hostility have acquired nuclear weapons resulting a risky situation. Even though both the countries are trying to improve the delivery system in which Pakistan is planning for submarine launched missile with nuclear warheads, modifying SM-39 exocet missiles from France or UGM – 84 Harpoon supplied by the United States and is equally acquiring advanced combat aircrafts.

Indian position is more feeble and is perceived defensive in nature. Pakistan on the other hand, has a more offensive policy on strategic front to thwart even a successful conventional retaliation from Indian side by using a bomb.

Examining 56 years of history of India and Pakistan which is more of conflict than of cooperation there is nothing spectacular as far kinds of arms race goes between them. It is a natural phenomenon as earlier mentioned by Adam Smith. However, looking deep into India's history where 'Panipat Syndrome' is still largely kept active by Pakistan, the military matters in South Asian politics holds significant importance. Evaluating economic cost in this context, it may be mentioned that defence is an essential arm for nations stability. But all that important is how to control and restrict the swirl of sword, to make it magnificently effective without causing much strain on the exchequer.

It is said that if only 50 percent of total annual military spending of India is diverted to social cause it would be enough to build nearly 6,00,000 schools, 90,000 hospitals, 60 million housings, 20,000 industrial entrepreneurship and save 500 million people from malnutrition besides providing succour to hundreds and thousands of people from famine, drought and floods.

However, examining the defence spending of India which is 17 percent compared to Pakistan which is 36 percent of the federal budget, the question arises that if only 9 percent of India's defence spending is depriving the country from development initiatives in social sector as referred above then where does

rest of 83 percent of the nations spending go, the other constraints notwithstanding.

It may be mentioned that even though spending on matters military retard the general progression but some fault lies with country's policies also. Yes, India has been a victim of arms race in South Asia. But look at the domestic scenario - a need for a weapon is conceived, blue prints are made, research is carried out, technology required is sought from outside, prototypes are made tested and finally weapon takes a shape. The requisition is demanded from the services and is supplied. After sometimes the weapon goes obsolete and work on a new defence system begins. All this is done by the Govt. machinery alone where conceiver, manufacturer, supplier and users are all Govt. agencies. So, where is the spin off on economic spending completely lacking? The country has no good policy on arms export because it goes against our tenets of non-violence policy.

It must be understood that war industry is a highly capital intensive game. Keeping in view the fast obsolescence life of any weapon system, all inputs from Research and Development (R & D) and Finance has to be constant which no govt. can afford to pay and sustain on its own. Why India? Even the United States government cannot afford it independently. The reason western powers have grown large Military Industrial Complexes (MIC's) is due to certain wise initiatives, which over the period are giving them dividends of an appreciable value, boosting country's economic, scientific and technological progress. Pakistan has a policy of exporting arms to gulf countries. Even the present missiles system Pakistan is developing through North Korea is by bartering away part of her nuclear technology. Even China is spending huge sums on maintaining large armed forces and simultaneously modernising its weapons and equipment by earning from right investments and defence deals.

India may not like to go in Pakistan way but it certainly needs to redesign her overgrown policy decisions and make amends with the changing times. Of late, India has come out with a

policy of opening its defence sector to private industry but there is a need to go long way in rationalising it otherwise compelling reasons of going for arms race on one hand and simultaneous negative investment on home arms industry on the other will cripple the national economy. The countries of South Asia must know that only rightful strategies will ensure peace in the region. South Asian stability has to be watched alone by the member countries. Any arms race in the sub-continent will drain out its measured economy for which prudence to any cause of conflict and corresponding solutions have to be met by the member states.

What a noble desire by the doctors of South Asian region to focus on the arms race in South Asia and strengthening people to people cooperation of these countries? It is said that only doctors can sway the minds of the people and leaders of South Asian countries need to be indoctrinated for better governance of the region. This alone will stimulate peaceful ideas for healthy growth of the countries of South Asia.

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(In 1927 Henry Barbusse sent a letter to **Rabinder Nath Tagore** asking him to sign an Appeal as a token of his stand against Fascism. Tagore signed the Appeal and wrote a personal reply. A part of Tagore's letter is given below as produced in *Visva Bharati Quarterly*. July 1927)

"It is natural to expect in primitive peoples faith in ceremonies of power - worship dripping with human blood; their awe - struck veneration for the relentless physical force that, at first, coerces and then fascinates its victims into the abject obedience of slavery. Such a mental attitude only indicates an immaturity of moral consciousness which like the thoughtless cruelty of adolescence, can claim a future of growth for its rectification.

But when a similar phenomenon makes its appearance among cultured people, it proves the second infancy of senility that has lost its control over animal passions. Its greed is not of impulsive youth, but of a hardened old age efficiently unscrupulous. Its infection is noxious because while it exhales from its core an unwholesome odour of decay and death, its outer skin swells and glows with an exultant flesh of rottenness."

SOUTH ASIAN STRATEGIC ENVIRONMENT IN THE COMING DECADES

Admiral L.Ramdas

“Asatho Ma Sad Gamaya
Tamso Ma-Jyotir Gamaya
Mrityoma Amritam Gamaya
Om Shanti Shanti Shanti”

“From the unreal lead me to the real
From darkness lead me to light
From death lead me to immortality
Let there be Peace Peace Peace”

Brahadaranyaka Upanishad Chapter 1, verse 3, line 28

Introduction

We cannot but admire the great achievements of humankind during the century just gone by especially in the areas of science and technology, information technology, the knowledge revolution, robotics and the green revolution, all of which are justifiably a cause for pride by the same token the horrific and unpardonable act of bombing Hiroshima and Nagasaki have also left an unpalatable and indelible imprint on the minds of the human race. Nor can the world ignore the terrible tragedies, which have accounted for over forty million lives due to war and conflict over the same period. Apart from World War II the world has been to witness to wars and conflict of varying types during the second half of the last century. The South Asian region has contributed its share to this account! Whilst addressing the United Nations Committee on Disarmament Koffi Annan the Secretary Gen-

eral of the UN said on 12 Oct 98 “”It is sometimes said that weapons do not kill but-people do” Just a scan around the world’s happenings will confirm the tremendous atrocities committed by man using simple and rudimentary weapons. It has always been the “human attitudes” and “mind sets” which more often than not been the real cause of wars and conflicts.

In our region, India and Pakistan have fought three and a half wars - [two and a half of which have been over the Kashmir issue]; India and China- one; India continues to be dealing with numerous internal security problems particularly in the North East; there is the ongoing Singhala - Tamil conflict in Sri Lanka; the Tibetan question in China; the Mohajir and Bihari problems of Pakistan; the democracy issue in Myanmar; the Communists-Maoist Guerilla issue in Nepal; the Gorkha issue in Bhutan; the internal problems of Bangla Desh. Superimposed on all this was the nuclearisation of India and Pakistan in May 1998. Needless to say that no examination of the Strategic environment of South Asia can be done without reference to the influence exercised by some key non regional players, like the USA, China, and Russia and the Global Military Industrial Complex - (MIC)

Whilst attempting to do some ‘crystal ball gazing’ for the coming millenium, we need to examine the likely political, economic, social and military trajectories that nations in this region are likely to take in the coming decade.

In this context we need to discuss the impact of the Cyber Explosion, Internet, Globalisation, Bio- Technology, WTO, Intellectual Property Rights and other related matters.

The Shrinking Globe and the New World Order

The power of the Information explosion, Internet, real time financial dealings where billions of US dollars are moved electronically by the trading and banking communities has made this world very much smaller than it ever was. National barriers have been broken like never before and

much of what happens is dictated by the tribe known as 'Investment bankers'.

Globalisation and enforced economic systems have tended to influence the destinies of many nations, including those in the subcontinent.

The end of the cold war brought about the current uni-polar, USA dictated world order with all its attendant problems. Its unilateral behaviour in dealing with Afghanistan, Iraq, Sudan, or Yugoslavia shows it all. Despite objections by two of the five permanent members of the Security Council, NATO's airpower (read USA) pounded tiny Yugoslavia, targetting civilian structures, dropping almost twentythree thousand bombs including the banned cluster bombs as also depleted uranium ammunition. To illustrate this point I would like to quote David Orchard writing in the Canadian newspaper, 'National Post' regarding NATO's attacks on Kosovo. (See Note-1 at bottom of page).

Surely a world, which believes in the theory of 'balance of power' cannot accept this. The dynamics of surge and international

Note 1. "Most 19th century wars were over trade. When the U.S. invaded Canada in 1812, Andrew Jackson declared, " we are going to vindicate our right to a free trade, and open markets.. and to carry the Republican Standard to the heights of Abraham", In 1839, Britain demanded China accept its Opium and attacked when China said No. . When Thailand refused British trading demands in 1849, " Britain found its presumption unbounded" and decided " a better disposed King be placed on the throne etc." In 1999, NATO said it was attacking Yugoslavia to force it to sign the Rambouillet "peace agreement" Significantly, Rambouillet stipulated: " The economy of Kosovo shall function in accordance with free market principles" and "There shall be no impediments to the free movements of persons, goods, services and capital to and from Kosovo." During the war Bill Clinton elaborated: " If we're going to have a strong economic relationship that includes our ability to sell around the world, Europe has got to be the key; that's what this Kosovo thing is all about. It's Globalism versus Tribalism". Tribalism was the word used by 19th century free trade liberals to describe Nationalism. And this war was all about threatening any nation, which might have ideas of independence. !

pressures will undoubtedly bring about a new world order where there are going to be many players in the coming century. Let us briefly discuss the roles of the extra regional powers and the influence of the Military Industrial Complex.

The United States of America

The United States is still likely to retain its lead position in all spheres of activity and especially in the technological field. However, its share of the world markets, and economy in comparison to the anticipated growth of the economies of China, European Union, Russia and possibly India is likely to fall in relative terms in the coming decade. Let us for a moment look at the overall global product - Market Exchange Rate (MER) trends.

This was 50 percent in 1947, 30 percent in 1960, and 21 percent in 1997, indicating a steady downward trend. Its share is likely to come down to about 17 percent by 2010. This will benefit China, Russia, and India who are expected to make a corresponding gain in their respective MER during the same period. USA's continued interest in Gulf oil and the gas reserves of Central Asia will dominate its moves and actions in the Indian Ocean Region. It can be expected to flex its economic and military muscle to support this vital interest. The USA will not allow the "Quality of life" of the American people to be compromised at any cost. Whilst the Americans have come to recognise the ground realities of the growing Chinese economic and military strength, they have also played their cards well to keep the Chinese engaged in trade and by granting them the most favoured nation status. A market-oriented strategy suits both China and the USA for the present and is likely to be sustained. The USA can be expected to put pressure on India and Pakistan to sign the CTBT and the FMCT and also to settle their outstanding disputes, including Kashmir, bilaterally.

China

China's economic growth at nearly eight percent annually over the past twenty years has been most impressive. During this period it has also steadily improved and modernised its military capability. There is very little doubt in anyones mind about

China's final destination as a 'super power'. Whilst China's economic performance has been impressive, its politics has puzzled many. Its recent belligerent attitude about Taiwan is a case in point. Where as there was a big hue and cry when North Korea launched a missile which overflew Japan, hardly anyone said a word when the Chinese fired their missiles off Taiwan. The Chinese have many unresolved issues in their neighbourhood including the outstanding boundary question with India. They have also made it very clear that they will integrate Taiwan with China, by using force if necessary. It has also laid claims to vast tracts of sea space in the South China sea. China's immediate and foreseeable security concerns are related to the development of the strategic scene in its neighbourhood. She has to contend with nuclear Russia to the north, Japan in the east, United States in the Western Pacific, and a resurgent nuclear India to the south.

Going by China's track record of the past twenty years, she is likely to promote good relations with all her neighbours, whilst steadily improving and consolidating her economic and military strength. There is no likelihood of her initiating a conventional or nuclear war against India in the coming decade. On the contrary it is quite likely that the two countries may conclude a border agreement during the period under review.

Russia

Russia for the moment is still struggling to recover from the ill effects of the cold war and the implosion of the erstwhile Soviet Union. Currently its politics and economics are in poor shape. It appears that the implosion process is still not complete. Dagestan is the latest on the list. One cannot afford to overlook Russia's tremendous nuclear and military potential, and inherent capacity to bounce back as a great power. Both international and domestic pressures, have influenced Russia's decision to change its nuclear strategy from non first use to first use of nuclear weapons - a very serious and challenging development indeed in the context of a weakening and tottering economy. Russia continues to be a leading exporter of weapons to many countries and will do its utmost to sustain it as this is its biggest produce!

Some analysts also believe that if pushed to a corner, they may be tempted to part with nuclear weapons technologies for a price. One hopes that this will not happen. Russia could in the next twenty years have an economy equal to that of Japan and half that of the United States. How it will use its military muscle at that stage will depend on its relations with both USA and China. For the present it will continue on its present track to put its own house in order and is unlikely to pose any security problems in its neighbourhood.

The Military Industrial Complex

The largest single multinational with an overarching reach, which is going to influence the trajectories of the Southern Asian nations is the one called the “Military Industrial Complex” (MIC). The impact of this seven hundred billion dollar industry on the developing nations is a case worth discussing. The principal exporters of arms also happen to be the leading Industrialised countries, namely the P 5 and Israel. Some figures here will help.

The share of the exports to the world’s armament market in percentage terms is roughly as follows:

USA	51 %	UK.	13%	Russia	12%
France	10%	Israel	7%	China	5%
Others	2%				

Since weapons are the main ingredients for waging war and other forms of conflict, any attempt to reduce the weapons or steps taken to demilitarise , is bound to attract serious opposition from the MIC lobby. So when we call for demilitarisation and ending sales of weapons, one must realise that this has a direct impact on profits, jobs and unemployment mainly in the industrialized countries. The conversion of defense industries into other kinds of products, hits at the root of personal security of the industrialists, workers, politicians, military and the middlemen. Therefore, to make this happen one needs to discuss this across the board with all participants where measures like collective security, education and training for peace

development needs, can be addressed. Only such an approach is likely to arrest the burgeoning pressure of the MIC.

Let us now examine the likely political, economic and military trajectories of the nations of the South Asian Region in the coming decade.

The South Asian Mosaic

Perhaps it was the first time in many years that in 1999 the entire South Asian Region could boast of all its member states being guided by democratically elected Governments. A great achievement indeed when viewed in the context of the world scene as a whole. This, however, did not last long for in October 1999, General Musharaff yet again came to rescue Pakistan from the corrupt civilian rule!

Now for some details from South Asia

South Asia has 3 percent of the world's area, 21 percent of its population and 2 percent of its GDP; of this India has 72 percent of the area, 77 Percent of the population and 75 percent of the GDP. The political, economic, social and military cooperation within the SAARC countries has regrettably not developed as it might have. The continuing confrontation between India and Pakistan, was further exacerbated by their nuclearisation and weaponisation programmes in May 1998. Indeed the other members of SAARC are paying the price for the intractable behaviour of their bigger partners. Militarism and historical baggage has impacted to a great extent the bilateral relationship between India and Pakistan. The advent of the new millenium is a great opportunity for India and Pakistan to understand that both their destinies are intrinsically linked through geography and history. The time has come for both India and Pakistan to shed their old mind sets and to look at creative and pragmatic alternatives to settle their outstanding disputes.

Focus by them on the more important issues of human resource development, rather than militarism and nuclearisation, would certainly generate a better climate for achieving 'detente'.

The Nuclear Imbroglia

India and then Pakistan, by their hasty decisions to weaponise after the May 1998 nuclear tests, have certainly added a new dimension to the strategic environment of the region. Not only has it created predictable anger and anxiety in the international community but also in the neighbourhood. The acquisition of nuclear weapons by both India and Pakistan has created new challenges which if not addressed frontally is fraught with danger.

Notwithstanding the traditional logic doled out by the champions of 'the Nukes', like political leverage, power, deterrence, savings in spending on conventional weapons etc. as justification for their possession, the sheer economics of this and, its adverse effect on human development should force the leadership to call a halt to this madness. Civil societies in both India and Pakistan have their work cut out to influence their political leadership to heed this call for sanity. India's draft 'nuclear doctrine' put out by the National Security Advisory Group, has generated even more heat than light and created concerns all round. We shall leave it here for the moment as this issue will no doubt be discussed in some detail later in the day.

India and Pakistan

The political scene in both India and Pakistan is likely to develop on slightly different lines. Whilst there seems to be a convergence in some areas especially the growing influence of fundamentalist forces - the Taliban and Mujahideen in Pakistan and the RSS and VHP in India, the influence of the military and the clergy in Pakistan is likely to continue being the dominant factor in its politics. In India on the other hand the military is likely to remain apolitical as hitherto. The situation of the minorities in both these countries will be dependent on the quality of the political managers that emerge in these countries.

Currently there is a lot of hype and rhetoric over Kargil and Kashmir.

The recent events at Kargil have demonstrated the hollowness of the nuclear deterrent theory and also the scant regard shown

to a good agreement arrived at Lahore in February 1999, by the Prime Ministers of India and Pakistan. Neither did it make savings in conventional warfare nor did it save any lives. We have ended up having to spend more on a wider armament package! Militancy and Militarism reside at different places in the same spectrum. As seen in India at present, Pakistan must put an end to its cross border terrorism and support to the so called militants in Kashmir before any talks can resume. There have been claims and counter claims by both sides that these militants are not Kashmiris but mercenaries like Afghan Talibans, Sudanese and even others who are there to kill, loot, rape, and destroy the peace in Indian held Kashmir. We need to create a "Culture of Peace" before any meaningful talks can take place. India and China have managed to keep peace along their Line of Control for nearly ten years, whilst trying to resolve the boundary question through dialogue. There is no reason why this approach cannot be applied to Kashmir between India and Pakistan.

It is unlikely that one will see any dramatic changes in Indo - Pak relations except that both seem to be determined on coming closer to the edge of the precipice. Ways and means must be found for defusing the situation and to find a political solution to the problems.

The time is ripe now for this to happen. Should for any reason the fledgling democracy of Pakistan be usurped once again either by the military, clerics or the Taliban motivated fundamentalists, this golden opportunity would have been lost again. No one can then forecast what form events will take, should this happen. The thought of the Government falling into the hands of the Talibans with control over nuclear weapons, is frightening indeed. During the recent Kargil operations, some people in responsible positions, both in India and Pakistan advocated the use of nuclear weapons. The risks therefore are very real.

A quick look now at some of the other features of both these countries. Whilst India has an economy nearly six times that of

Pakistan, the point worth noting though is that Pakistan has always had a slightly higher per capita income than India.

Looking ahead, should India and Pakistan maintain a 7 per cent growth rate over the next 20 years, the Indian economy will be US \$ 1050 billion - bigger than the US \$ 260 billion in 1997. Needless to say that an India with such an economic growth is certain to get mileage for its political clout. If Pakistan fails to recognise this reality, and continues to compete with India's growing economic and military strength it will end up with incurring economic costs that will be many times that of India which it may not be able to sustain. India will no doubt exploit this situation to its advantage unless some kind of political settlement is arrived at during the interim period.

Bangla Desh and Sri Lanka

Bangladesh with its 123 million people, next only to Pakistan's 133 million, having half of Pakistan's GDP and spending only about a sixth of Pakistan's expenditure on Defence, is currently going through an interesting phase in its development. Its economic growth rate has moved up to nearly the same as India's 7 percent. It has the most vibrant voluntary sector, where a lot of work has gone in empowering women. There are over 4 million women working in this sector - the largest in South Asia. This has made a noticeable impact on literacy, fertility reduction and women's economic situation.

With improved political understanding trade and transportation both India and Bangladesh will have much to gain in the coming years.

Sri Lanka with a per capita income twice the South Asian average and with almost 85 percent literacy compares favourably with some developed countries. The main issue plaguing Sri Lanka has been the Singhala - Tamil divide. The sooner the Singhalas realize that they cannot subjugate the Tamils by force and shape course instead for a political solution, will peace return to this island nation. The current talks(2003) is a good sign but as envisaged it is having to

meet with a lot of obstacles. Nevertheless talking and dialoguing is a welcome development.

Sri Lanka has much to gain by increasing its trade with India whose economy is nearly 25 times its size. It has no external threats and being a maritime nation enjoying a strategic position in the Indian Ocean has many opportunities, to develop into a mega trading center.

Nepal has perhaps the lowest HDI rankings in South Asia. There is no doubt that its special relationship with India will continue.

Of all the countries in South Asia it has the maximum to gain economically by furthering its political relations with India. The recent agreements arrived at between the Foreign ministers of India and Nepal, are going to strengthen this relationship even further.

Bhutan has its very special relationship with India. It has the citizenship problem of many Nepalese who have been working in Bhutan for many years. No doubt good sense will enable this ticklish question to be resolved soon.

Maldives has an essentially tourism economy and seems to be doing well. It had a slight external security problem some twelve years back, but all seems to be going well there. They would be the most happy lot when SAARC and SAPTA (South Asian Preferential Trading Arrangement) become effective agencies.

The future of SAARC and SAPTA

It is indeed a great pity that SAARC and SAPTA have not lived up to the expectations reposed in them when they were created. The Indo - Pak problems, the apparent asymmetry in the various economies of the member states, mutual fears and rivalries, a total lack of trust and many other reasons have contributed to this state of affairs. India must demonstrate its willingness and ability to take the lead in many ways if SAARC and SAPTA are to become even half as effective as other regional alliances.

By contrast, right next door we have the example of ASEAN and there is much to learn from the experience of our friends in

ASEAN. They also had their doubts and fears. There too, nations had been at war with each other, and yet they have demonstrated the wisdom and maturity to overcome their historical 'baggage' to create what today is certainly the envy of most countries. For their size and populations they wield much more economic and political clout than India. For example, out of the \$300 billion flow of resources into developing countries, only \$15 billion comes to South Asia, \$103 billion goes to East Asia and \$21 billion to sub Saharan Africa (World Bank Report 1998). The ASEAN experience clearly brings out the need to invest in Human Resource Development and the requirement to cultivate a culture of trust and cooperation.

If India would show the way things will happen in the SAARC. We could begin with economic cooperation and let political issues take the back seat for the moment. Time will solve many of these seemingly impossible problems once the artificial barriers are broken. Having thus far looked at the emerging South Asian strategic environment, let us now examine the challenges and opportunities that lie ahead.

Challenges and Opportunities

The challenges that confront the South Asian nations are a combination of political, economic and security issues. The principal players from the region who can either make or break the system are India and Pakistan. Extra regional actors include China and the USA. The China factor is relevant in the context of the nuclear weaponisation of South Asia and India's security concerns. The continuing presence of the American Fleet in the North Arabian Sea needs also to be noted. Like all difficult situations this one also offers many opportunities to the member states of South Asia, to come together and evolve a recovery, resurgence and peace initiative within the framework of SAARC.

Whilst there are a lot of reasons for the countries in the South Asia to be worried and concerned, there is a ray of hope if the political and bureaucratic managers - especially those in India and Pakistan - understand the importance of economic development, promote human security as opposed to 'national security', and shed their hatred and mistrust of each other. Nuclear

weapons and rhetoric is not going to get these countries anywhere. A drastic change of attitudes is required. 'The Line of Control' needs to become 'the Line of Peace' certainly till such time as a final solution is found. China and India have managed to keep their existing Line of Control as a Line of Peace, there is no reason why Pakistan and India cannot do likewise.

On the economic front India and Pakistan owe it to their South Asian neighbours to set aside their political divide and to get on with economic cooperation within the framework of SAARC and SAPTA. The fallout of the burgeoning economies will create a dynamic of its own which will help the promotion of peace and help resolve outstanding issues more easily. The cooperative spirit can then be extended to the political and security arenas at an appropriate time and as and when the member states feel comfortable with it.

For evolving any meaningful and lasting security arrangements as also nuclear confidence building measures in this region, we need to associate China, together with India and Pakistan in this process. Hopefully a new 'triad of destiny' shall emerge. This may appear as a pipe dream at present, but so did the Berlin wall, Palestinian - Israeli rapprochement, Abolition of Apartheid and the abolition of Chemical and Biological weapons.

Abolition of Nuclear Weapons

There is no doubt that nuclear weapons constitute the greatest danger to humankind. Every effort must be made to prevail upon the five Nuclear Weapon States, and the three nuclear weapon capable states- India, Pakistan and Israel to convene a nuclear weapons Convention at the earliest to work out a template for the **total abolition of nuclear** weapons. So long as nuclear weapons exist there is always a risk of them being deployed either by accident or design.

The role of 'Civil Societies' in bringing about the abolition of nuclear weapons will be significant. Certainly this will be the single most important item on the agenda of the next millennium.

Conclusion

One had hoped that this new millennium would usher in Peace and Justice, but on the contrary we have been witness to 9/11 attacks on the World Trade Center, USA war on Afghanistan, Iraq and she is currently threatening Iran too! The War against Terror has occupied front seat. A divided world stands at the crossroad of committing troops to bailout the Americans in Iraq. Wars are constructed in the minds of people, and therefore we need to evolve a new culture of peace. If we were to draw up a balance sheet of the overall performance of the international community, we will show up poorly. It was not the lack of ideas, conventions, strategies or treaties, but the lack of political will to implement anything that has been agreed upon which caused this. Will humankind change or continue to procrastinate as always? Perhaps time alone will tell.

The emergence of China as a super power, and the growing economic power of the European Union, Russia and India and corresponding waning of economic power of the USA and Japan in the coming decade is going to make a significant impact on the existing unipolar world order. It is more likely to look like a multi polar configuration with shared interests and economies. The strategic environment in the South Asia scene in the next millennium is going to be troublesome but not unmanageable. The real danger from nuclear weapons must be understood and the new millennium must usher in the total abolition of nuclear weapons. Most countries in this region will be on an upward economic curve provided politics is managed well. Strong nationalistic feelings must give way for good neighbourliness and regional co-operation. Hopefully wisdom and maturity will guide the thoughts and actions of leaders of this region to ensure peace and justice in the coming century. This is the challenge before the South Asian Community today.

A DRAMATIC DETERIORATION

Achin Vanaik

Just how dramatically matters have deteriorated since the nuclear tests of May 1998 can perhaps be best illustrated by recounting the predictions made by Indian strategic 'experts', which approved of the Indian tests that initiated the nuclearization of South Asia because of their strong faith in the wondrous powers of nuclear deterrence. Each and everyone of these 'experts' made one (usually more) of the following predictions shortly after May 1998.

- 1) It would be a good thing for India and Pakistan to go openly nuclear. This will lead to greater regional peace and stability.

Relations today between India and Pakistan are at their worst in decades. No one in their right minds can argue that regional peace and stability have been enhanced since 1998.

- 2) The chances of a nuclear exchange between India and Pakistan will become even more remote.

A nuclear exchange is neither inevitable nor are the chances of it negligible. The most balanced assessment today would suggest something in between. A nuclear exchange is not merely a worst case scenario but a real case one.

- 3) A conventional war will be deterred between India and Pakistan.

There was Kargil in 1999 and the near miss in Summer 2002. Few would deny that the chances of a future military conflict are significant. So much for the casual confidence of the past.

- 4) There will be no competitive nuclear arms race between the two countries.

Both India and Pakistan are today accumulating stocks of fissile materials to make more bombs. Both are busy weaponizing and matching warheads to missiles. Both are enhancing the range and accuracy of their missiles. Both are putting in place command and control systems. Both are developing nuclear doctrines and policies.

- 5) India will establish a “minimum credible deterrent”.

Yet it has not been possible for the government or the strategic community to arrive at a consensually agreed estimate of how much is enough. How can it when this minimum cannot be a fixed or stable position but is a moving one dependent on the quality and quantity of weaponry held by its perceived rivals? This includes China, which can be expected to enhance its offensive capabilities now that the US is embarking on the NMD.

- 6) The acquisition of nuclear weapons by India and Pakistan, by increasing their respective bargaining power in the world arena will actually promote the prospects of global nuclear disarmament

The less said about this absurd argument the better.

The Current Context

This is the context in which we have to view the latest developments of the setting up of a Nuclear Command Authority in India with its claim of institutionalizing alternative chains of command (should the ‘enemy’ launch a pre-emptive ‘decapitating’ strike), and the dilution of its previous No Use commitment to non-nuclear states that are now warned that they can face nuclear attack even if they use chemical or biological weapons, though a huge chasm in terms of consequences still separates nuclear weapons from even these weapons. The degenerative logic of seeking security through nuclear weapons has now taken hold. The Musharraf government in the typical fashion of nuclear bomb buffs has to claim various virtues for Pakistan’s nuclear arsenal. So he declares that but for its nuclear power India would have launched a conventional attack on Pakistan. Moreover, he warns, Pakistan will reply ‘unconventionally’ to any future conventional Indian assault.

The obvious follows. An India that has already claimed various virtues for its nuclear arsenal and keen to disabuse Pakistan of its belief that it can hide behind a nuclear shield, had already in the past through the figure of the defense minister, George Fernandes, (and others) declared that India was not deterred by the Pakistan 'bluff' and fully prepared to teach it a lesson, if need be. Not surprisingly, the same George Fernandes (again not alone by any means) now seeks to 'reassure' the Indian public that even if a couple of Indian cities are bombed, India will devastate Pakistan in reply. What an extraordinary state of affairs! Not one 'expert' is prepared to inform the Indian public that *actually* carrying out a second strike can never be an act of security retrieval or enhancement (once a first strike has taken place one's security has gone) but can only be an act of revenge. Moreover, it is a senseless act of revenge because it only initiates a further action-reaction chain of nuclear exchanges. Nor is anyone prepared to point out that if today India has the capacity to inflict more damage on Pakistan than vice versa, in due course (some years down the line) Pakistan will acquire the missile range and stocks of warheads capable of effectively wiping out all of India, and that it is little 'consolation' for India to be able then to wipe out Pakistan several times over!

For all the current talk of being able to inflict "unacceptable damage" on the other side, the honest truth is that no one can know for sure that after a significant or substantial or massive enemy first strike whether enough would be left over to inflict unacceptable damage in a retaliatory second-strike, besides the fact that such an act is merely irrational revenge. It was the constant search for the always elusive 'credible' second-strike capacity that drove the US and USSR to an arms race that reached truly insane levels, and that will drive India and Pakistan to emulate them on a much lower but still constantly escalating scale. Fear of a decapitating first strike has pushed India into developing "alternative" chains of command. No doubt Pakistan, with much less strategic-territorial depth, has done the same. Shorn of its euphemistic tone what this means is that both countries are committed to a certain level of dispersion and delegation of authority to use nuclear weapons away from

the Prime Minister or even the very topmost layer of political control, since decapitation can itself be very substantial. This dispersion-decentralisation of authority is itself a risk, and furthermore, there is still never going to be any guarantee that such alternative chains of command will not be deeply disrupted or adequately survive a massive first strike.

One should, therefore, expect a new kind of ‘infighting’ to now emerge within the Indian pro-nuclear lobby itself. There are going to be a number of voices now calling for abandoning the No First Use posture since this might be read by Pakistan as an invitation to launch a massive first strike sometime in the future. Over time one can also expect more voices to be raised about the need to move towards very high levels of preparedness such as provided by a “launch-on-warning” posture. It will then be argued that to make deterrence truly effective it is necessary to do this because only then is a massive second-strike attack against Pakistan virtually guaranteed so that it cannot hope to destroy India’s retaliatory capacities through a huge first-strike no matter how decapitating or destructive this might be. So Pakistan will never strike first. Deterrence through a launch-on-warning posture is, of course, yet another level of madness in nuclear strategic thinking but that does not mean it won’t come about. From 1982 to 1992 Russia made a No First Use pledge but like the US, it nonetheless in the eighties adopted a launch-on-warning posture.

A Road to Greater Sanity

There is, however, a road to greater sanity. Even if resolving the Kashmir issue is possible only in the long term, what one can try and do is to put in place two firebreaks. The first is between cross-border terrorism in Kashmir, and war. There exists ever since 1948 when a cease-fire line was established (now known as the Line of Control in Kashmir), a United Nations Military Observer Group in India and Pakistan (UNMOGIP) authorized to investigate complaints over cease-fire violations. India, in 1972, declared that its mandate was over but allows it to function. The UNMOGIP with a mere 43 observers is not mandated to report on armed movements across the LoC. But there is no reason why its strength cannot be greatly enhanced to around

4000 and its mandate revised and broadened so that it is empowered to also report to the UN violations of 'other security commitments' made by the two countries.

Since Pakistan has assured that it will not allow its territory to be used as a base for cross-border armed activity, such a strengthened UNMOGIP would put in place an international buffer force, not controlled by the US, which can check on the claims of either country and, all-in-all prevent tensions from increasing excessively as well as substantially ward off the likelihood of head-to-head military confrontations along the LoC. The appropriate model here is the work done by the United Nations Mission in Eritrea and Ethiopia (UNMEE), which is mandated to "assist in ensuring the observance of the security commitments agreed by the parties." Despite the opposition of Pakistan, and particularly India, to such a buffer force, a concerted international effort along these lines has some chance of success.

The other firebreak has to come between a conventional war between the two countries and its possible escalation to the nuclear level. Here, the only realistic firebreak is de-nuclearization, difficult as it may currently seem. Again, the principal roadblock remains India. On five occasions since coming to power in August 1999, General Musharraf has offered regional denuclearization if India was also willing to go along this path. In making this offer, Musharraf was going against the views held by a large section of the Pakistan establishment that it needs nuclear weapons to balance out India's conventional military superiority. It also contradicts some of his own official statements about the security value of nuclear weapons to Pakistan.

Yet it is not entirely surprising that he has made and repeated this offer. It also reflects another view, widespread within Pakistan, that since India is its principal security problem, mutual de-nuclearization is acceptable and preferable to the continuation of nuclear rivalry, with its disproportionate burden on Pakistan's economy and polity. On one occasion after May 14, 2002, Musharraf made his offer in response to India's suggestion that Pakistan adopt, like India, a No First Use commitment.

Musharraf declared that he was prepared to go much further and that India should accept what he proposed.

Ideally, both would be desirable: a Pakistan commitment to No First Use as a transitional measure while both countries move towards accepting regional de-nuclearization within a stipulated time-frame. Unfortunately, there is little chance of either proposal being accepted by the other side, today, or in the near future. But it is still the only sensible direction to take. The alternative to this is accepting the current state of affairs and acquiescing in its unfolding and uncertain dynamic. In the most optimistic of cases, this is bad and dangerous. In the most pessimistic of cases it could be disastrous. As a transitional measure towards eventual regional disarmament there is the need to pursue nuclear risk-reduction measures. Both governments in Delhi and Islamabad have said they want to establish such risk-reduction measures but it is striking evidence of the irresponsibility of the bomb lobbies and governments in both countries that to this date the only serious efforts at formulating and circulating properly worked out nuclear risk-reduction measures elucidating both their weaknesses and their strengths, have only come from the ranks of the anti-nuclear disarmament movements in South Asia. In this regard detailed proposals formulated by the Movement in India for Nuclear Disarmament (MIND) were released to the press in June 2002 and then published in the *Economic and Political Weekly* in September 2002. Furthermore, another set of proposals broadly similar in content were worked out by a joint team of Indian and Pakistani scholar-activists, namely M.V. Ramana, Zia Mian and R. Rajaraman and also released in the *EPW* in late 2002.

THE ARMS RACE Vs. THE HUMAN RACE WEAPONS AND THE FUELLING OF A VIOLENT WORLD ORDER

Sonia Jabbar

When I was a child we used to spend our summer holidays in Kashmir, my last visit of that nature being the summer of 1988 just before the insurgency began in earnest. The valley was an idyllic and peaceful place and the breathless descriptions in tourist brochures likening it to paradise were no hyperbole. So, it came as a shock when I returned in 1997 as a journalist to cover the troubled region to find paradise, literally, lost. Guns were everywhere whether with the estimated 350,000 Indian troops or with the militants, a tenth of the Indian strength, but equally if not more ferocious. Very soon I learned to tell an AK47 from an LMG and an LMG from an HMG, weapons which caused immense suffering to thousands of Kashmiri civilians. The proliferation of these weapons— an anomaly in such a beautiful land— became of great concern to me.

But it was only a couple of years ago that the problem of small arms and light weapons began to get articulated in this country. I attended a few seminars and conferences organised by some NGOs and had the sneaking suspicion that the organisers (who seemed otherwise indifferent to the political context from which armed struggles had emerged) had become interested in the issue not due to the work they were already doing but, as in much of the case of HIV/AIDS work in India, were largely motivated by generous foreign funding. The interest in foreign funders to generate research in countries such as ours in turn came from a need to gear up to the large UN Conference on the Illicit Trade in Small Arms and Light Weapons in All Its Aspects, mandated in December 1999 by the General Assembly, and held in July 2001 in New York.

The second curious thing about the Indian focus on small arms and light weapons is that because of the esoteric nature of the subject, the 'experts' are either largely retired army and police officers or researchers from government or quasi-government think tanks. Thus the thrust of their enquiry is confined to small arms proliferation among non-state actors. Not that one wishes to underplay the threat of militants or terrorists, which is real and deadly, however, it is important to recognise that they do not constitute the whole picture. By focusing merely on non-state actors the argument sidetracks the role of the state in arms proliferation, wittingly or unwittingly allows for the monopoly on violence to remain firmly with the state, and reduces the menace of small arms to a single-dimension 'law and order problem.'

To illustrate the issue let us return briefly to Kashmir. In the early 1990s the Indian state found that even with massive troop saturation in the valley it was not powerful enough to counter the sting of Pakistan-backed militants, who had the element of surprise on their side—a vital factor to tip the balance in insurgencies. It was with the creation of the Ikhwan ul Muslimeen, a ragtag counter-insurgent force made up of surrendered militants, that the Indian forces began to gain ground in Kashmir. The Ikhwan knew the *modus operandi* of the militants: the routes from Pakistan into Kashmir, the Gujjar guides, the hideouts, the likely hiding places for arms caches, the likely candidates for militancy, the spies and over ground workers. And so, within a short period, the security forces were able to 'sanitise' the valley to a great extent and made it difficult for the militants to operate as they did before with impunity. The problem arose because the Ikhwan were rarely answerable to anyone. As long as they helped in keeping up the number of 'kills' of the militants, a blind eye was turned to their spare time activities. With gun in hand, murder, extortion and rape became the order of the day. Land feuds, business rivalry and other enmities, which had nothing to do with the war *per se*, were settled through these mercenaries. Thus, the civilians, already having to live under the threat of the twin terror of militants and security forces, had a third, wholly unpredictable force to contend with.

When violence and counter-violence become the means to solve problems that are essentially political in nature a whole host of unforeseen complications develop. The proliferation of sophisticated weapons is not limited to the actions of the militants alone. A few years ago the state struck upon the idea of forming Village Defence Committees (VDCs) in areas, which due to their remoteness and inaccessability, were vulnerable to the threat of militants and not possible to bring under the ambit of the security forces. These VDCs were haphazardly given arms training by retired army personnel and were armed with obsolete .303 rifles by the state. A monthly salary of Rs.1500 was paid to each member. Rather than acting as a deterrent, the VDCs became the proverbial red rag to the bull. The militants got incensed by what they perceived as a challenge to their authority in the area and attacked the VDCs with greater ferocity. The VDCs were unable to meet the challenge with their minimal skills and armoury. What should have been abandoned as a bad idea got further complicated when the problem was identified as the VDCs lacking sophisticated weaponry. The VDCs appealed to the state to provide them with AK47s to match the militants. In many areas they have been equipped with sophisticated SLRs. So, what were once peaceful villages in the thickly forested hills of Jammu and Doda have slowly and surely been drawn into a vortex of violence not of their own making. The inhabitants of these areas where previously were only witness or the occasional victim of militant violence, are today vital actors in the war.

The state claims the VDCs to be a success story as, like the Ikhwan, they have added their share to the list of militants killed annually. The state believes that there is little chance of the VDCs activities turning criminal as the members are not surrendered militants or criminals but ordinary villagers. But the state has failed to take into account all that is difficult to gauge and quantify in lists and numbers: namely, what happens to a society which is rapidly becoming militarised? What happens to the farmer and his family whose preoccupations have shifted from the plough to the sword to the rifle and to the automatic rifle? It isn't as if the killings of civilians have stopped or gone

down because of the VDCs. Every time the militants have been determined to strike—as during the elections where an unprecedented number of civilians were gunned down or the brutal beheading of women in Rajouri last year—they have done so with impunity. Will the state's answer to this be to arm every single household in troubled areas? And if and when Kashmir is finally resolved, what is to be done with all the men bearing arms? Does the state believe that they will merely turn in their weapons, that an entire population and future generations will remain unscathed from this violent experience?

The Arms Trade & War

The Tehelka scandal revealed the filth, which lurks behind such grave words as National Security, Patriotism, and the Sacrifices of the Soldier. It showed that there lies a vast industry worth unimaginable sums of money, where deals worth billions of dollars are casually discussed, and where greed and corruption rule unabashed.

There are an estimated 22 million soldiers on the planet. The world spent \$842 billion on military in 1997. With so many resources being poured into defense, security should be guaranteed to the entire human race, and war should be a thing of the distant, barbaric past. On the contrary, between 1989-1998, 61 major armed conflicts were fought. Of these only 3 were between nations, the rest being civil wars or intrastate conflicts most often fought around religious or ethno-nationalist issues.

War, as we knew it, as it was fought in the World Wars—formal, structured, and distinct, where victories were decisive and the casualties mostly combatants—no longer seem to exist. Instead what we see today are conflicts which drag on through decades like some unending nightmare: Somalia, Yugoslavia, Cambodia, Rwanda, Liberia, Zaire, and in our own neighbourhood, Afghanistan, Sri Lanka and Kashmir. Devastating wars with no end in sight, which have killed between 20-30 million people since 1945 and more than one million in the 1990s, of which an estimated 50 percent were civilians. Wars that have targeted homes, infrastructure and agricultural production, creating massive refugee flows, so

that over 65 million people world-wide were displaced in the past decade.

Fueling these conflicts is the global traffic in weapons, blurring the line between political and business interests. Few of the combatants in these wars produce any, let alone all, of the weapons they use, and must rely on regular, reliable sources for arms and ammunition. If these sources dried up it would be near impossible for the combatants to continue operations in the same scale and with the same intensity.

The official arms trade is one between governments and/or private arms companies and the governments of importing countries. The value of trade in arms in 1997 was \$55 billion. The leading exporting countries were the United States with 55% of the market share, followed by the United Kingdom, France, Russia, Germany, Sweden, China, and Israel. Five of the eight top arms exporting countries are the permanent members of the UN Security Council, ostensibly to ensure a more secure world. It would be no greater absurdity if the world's biggest drug dealers were to form a world council to control drug abuse.

Do rules govern trade in arms? Unfortunately, only the rules of commerce. If the global phenomenon of Dirty Defence Deals is the iceberg then, it is true, that poor Bangaru Laxman and Jaya Jaitley were merely the tiniest crystals in the puniest snowflake that rests upon it. In the U.S., there are large corporate and legal lobbying firms that represent the American weapons industry in Washington and seek to influence US weapons trade policy by spending millions of dollars in political campaign contributions and public relations. In the 1995-96 U.S. election cycle, 25 leading weapons exporters contributed a record \$ 10.8 million in campaign funds, mostly to the Republican party and Republican lawmakers. There is a lot at stake: a small weapons export decision can result in hundreds of millions to billions of dollars of profit annually for the arms corporations and high paying jobs for American workers.

The official U.S. line is that American arms exports promote regional stability by creating balances of power and building up the deterrent capabilities of US allies. But far from creating re-

gional stability such weapons transfers only spur a regional arms race. Saudi Arabia, Kuwait, and the UAE received billions of dollars of sophisticated weaponry in the 1990s, in order to deter attack by Iraq or Iran. But this only increased Iran's threat perception causing it to seek weaponry from willing suppliers in Russia and China. The U.S. then found these arms sales "destabilising" and sought to transfer more arms to the region in pursuit of an elusive strategic arms balance. And so, Saudi Arabia, who spent only \$ 9 billion between 1985-89, became the number one arms importing country between 1995-97, buying \$31.3 billion worth of weapons.

The regional stability argument can hardly be convincing considering top arms exporters are blatantly indiscriminate when it comes to business and often end up arming both parties to a dispute. The U.S. sells to Greece and Turkey, Persian Gulf Sheikdoms and Israel, Egypt and Israel, China and Taiwan. Pakistan is one of the best customers of France buying arms worth \$390 billion between 1995-97. And yet, the Kargil war had hardly ended before the French were flocking on Indian shores, defence contracts worth millions in hand.

For all the ostensible attention that the members of the Security Council pay to upholding democratic and human rights, when it comes to the hyper-competitive arms bazaar these are frequently sacrificed to business principles. Buyers often threaten to turn elsewhere if there are conditions attached to a sale, making the arms corporations pressure their governments to drop the clauses, which may offend customers, making a mockery of policy and principles. When many European governments criticised Turkey for Human Rights abuses against the Kurds, Ankara placed the most vocal critics— Austria, Finland, Sweden and Switzerland— on the prohibitive "red" list, the less critical governments of Norway and Benelux countries were to be reviewed on a case by case basis and put on the "yellow" list, and the U.S. was rewarded for its silence by being placed on the most favoured "green" list.

Compounding the huge legal trade in weapons that fuel conflicts is the equally huge illegal trade in weapons used by insur-

gents, which are procured in the black market. There is a fine line between legal and illegal transfers, with many weapons starting off in legal production and exports eventually ending up in illegal circulation. Most of these are small arms—pistols, rifles and carbines, assault rifles and light machine guns—and light weapons—heavy machine guns, hand held and mounted grenade launchers, shoulder fired anti-aircraft guns and missiles, rocket launchers, mortars, anti-tank guns and recoilless rifles. These weapons are widely produced and available, relatively easy to conceal and require little logistic support and training to operate and are thus favoured by anti-state forces. The magnitude of the illicit market is unknown but it is estimated that 500 million weapons are currently in circulation. This is increasing every year because of the demand from the many on-going wars across the globe and the large stocks of surplus arms produced by the arms manufacturers. Although small arms and light weapons are not as massively deadly as are nuclear or other special weapons, the sheer bulk of these arms and their prevalence make them truly weapons of mass destruction.

Ironically, a major source of illicitly trafficked arms today are the large stocks of light weapons that the United States and Soviet Union provided to Cold War proxy forces in the 1980s. Millions of guns and grenades disappeared into conflict zones in the Andes, Southeast Asia, Southern Africa, Central America, the Horn of Africa, the Levant, and the Persian Gulf. These guns have long lives, and not surprisingly, the sites of pitched conflicts like Cambodia, Lebanon, the Horn of Africa, and the Afghan-Pakistan border region, have actually become havens for exporters of weapons!

This policy has directly impacted India. After the Soviet invasion in 1979—which introduced tons of military material into Afghanistan—the U.S. began to see both Pakistan and Afghanistan as “forward defence areas” against the Soviet empire. The Reagan administration decided to arm the Afghan resistance with a massive military assistance programme worth \$3 billion, with the CIA becoming the supplier, and Pakistan and the ISI the intermediary and distributor.

In an attempt to conceal its support for the Mujahideen and cover the tracks of American involvement, the CIA set up secret bank accounts in Switzerland into which the U.S. and Saudi governments directed their contributions to pay for arms from a variety of sources. These included: massive amounts of Type 56 assault rifles from China, small arms and artillery from Israel and Egypt, captured Soviet weapons including the AK 74 assault rifle, 60,000 rifles, 8,000 light machine guns and over one hundred million rounds of ammunition from Turkey, large quantities of Technovar anti-personnel land mines made in Italy and procured via Egypt, 40-50 Swiss-designed Oerlikon anti-aircraft guns capable of firing 1000 rounds per minute with each round costing \$50, Blowpipe surface to air missiles from Britain, 30 million rounds of ammunition from Pakistan Ordnance Factory supplies which were facilitated by a Pakistani arms dealer, Soviet weapons captured from Israel's invasion of Lebanon, and—100,000 Enfield .303 rifles bought from India!

This massive procurement effort meant that in 1983, 10,000 tonnes of weapons were transferred to Afghanistan via Pakistan, which rose to 65,000 tonnes in 1987. While these arms shipments to Afghanistan helped end the Soviet occupation, the manner in which they were transferred caused devastation in South Asia years later, flooding the region with sophisticated weapons that had never been available in such a large scale. The "Arms Pipeline" commenced at Karachi or Islamabad and made its way to the major storage depot at Ojhiri, outside Rawalpindi or directly to Quetta and Peshawar. But because of the covert nature of the operation, extremely poor records were kept which enabled persistent leaks in the pipeline. Traveling several thousand kilometers by truck, ship, train or pack animal, the weapons would be loaded and unloaded at least fifteen times before reaching the Mujahideen. This allowed ample opportunity for arms to be siphoned off at each point in the pipeline to reappear in the arms bazaar in the NWFP or in the hands of the Khalistani or Kashmiri militant. Nearly the entire arsenal of the Kashmiri militant points to origins in Afghanistan. The role of the U.S. in exacerbating the levels of violence in South Asia is quite clear. The consequences

of the failure to plug the pipeline, to prevent weapons from spilling into other conflict theaters in the region could have been easily predicted, especially since Pakistan's historical commitment was no secret.

Infinite Greed other banalities & the war machine

Contrary to common wisdom, modern wars are not fought for high principles, as they would have us believe, but to augment or defend strategic or economic assets. More often than not it is pure greed or even something as banal as a need to test new weapons systems that drives the war machine.

After World War I, the Royal Air Force, which played a minimal role during the war, would have been disbanded had it not been for the perspicacity of its Commander-in-Chief, who suggested that Britain could put an end to their long and extremely costly land wars in the colonies by using air power to overwhelm their enemies. One week and only £ 77,000 later, the 'Mad Mullah of Somaliland' who had long defied the British, was driven out into the desert by the bombs and forced to surrender, his kingdom destroyed, and his family and counselors killed. Far from disbanding it, the government then offered the RAF £6 million a year to take over operations from the army in Iraq, and then used its services to secure a quick victory in the third Afghan War. After this, the RAF was, as they say, in business and set an example for successive world powers to emulate. Henceforth, the bombing of civilians in wars could not only be cloaked in fine sentiments such as ridding the world of "evil empires," and "rogue states," but the noble, and seemingly reluctant avenger could also make a quiet profit on the side while carrying out the civilising mission.

The Atomic bomb was dropped in Japan in August 1945. It killed 1,40,000 people in Hiroshima and 70,000 in Nagasaki. The Americans claimed that it was the only way to end World War II, a fact contested by many, including Winston Churchill, and the Chief of Staff of the U.S. Army. Whatever the reason, the bombing of Hiroshima clearly demonstrated to the U.S. establishment the deadly capacity of the bomb, and paved the way for massive investment worth \$5,800 billion into the

new scientific-military-industrial complex which developed nuclear weapons.

Iraq was pounded into submission during the Gulf War. Undoubtedly Kuwait benefited from the US action, but then so did the Saudis. Naturally, the Americans profited on several fronts. In an MSNBC interview, the Gulf War commander General Norman Schwarzkopf conceded that the war was in part an attempt to convince a skeptical American public cautious about overseas military intervention since Vietnam, as well as restoring, in the world's eyes, "some of the prestige [the U.S. military] lost in the Vietnam War."

The war also provided the U.S. with an arena where it could not only test and demonstrate the efficacy of new weapons, but also an opportunity to double its arms exports. Like it did in the 1970s where it recycled "petrodollars" with arms transfers to the Shah of Iran's regime, the U.S. increased arms sales to major oil exporters to help maintain America's balance of payments. Thus the U.S. share of the global export in arms moved from 28% in 1987 to 58% in 1997, the main importing region being the Middle East. In 1991 Kuwait had the dubious distinction of being the only country in the world which spent more on its military than what its entire economy produced. Saudi Arabia went from being a modest military state before the Gulf War, importing weapons worth only \$9 billion between 1985-89, to becoming the leading arms importing nation in the world between 1995-97, buying weapons worth \$31.3 billion—mainly from the U.S.

Significantly, the sanctions against Iraq, which forced them to relinquish control over their oil (10% of the world's supply), directly benefited Saudi Arabia. Iraq's share of supplying 3 million barrels a day to the oil market was added to Saudi Arabia's, increasing its market share from 5 million barrels a day to eight million, the profits of which Iraq accuses the Saudis of sharing with America.

When the West has a recent history which puts the exploits of medieval marauders like Chenghiz Khan to shame, it is but natu-

ral for some of us to view the operation against Afghanistan and Iraq with some suspicion. Was 'Infinite Justice' really the U.S. government's natural inclination to seek retribution for the horrific terrorist acts of September 11, or a golden opportunity to consolidate 'Infinite Power' once and for all?

The U.S. once again used the battlefield for testing new weapons and prototype technologies (sensors, UAVs and cave busting "earth penetrator" bombs). The U.S. Congress recently put a "down payment" of \$40 billion on fighting terrorism, a "significant piece" of which went towards bringing the military to "the highest levels of preparedness." In addition, President Bush added \$50 billion to the 2002 defence budget, creating speculation in the arms industry for large new orders. Lockheed-Martin Corporation was awarded a contract worth upwards of \$200 billion to build its new radar-evading Joint Strike Fighter. Lockheed, the U.S.'s No. 1 defense contractor, beat out rival.

Boeing Corporation for the coveted deal, the largest in U.S. military history. The President also used the opportunity created by 9/11 to push through any opposition to the NMD or Star Wars project costing trillions of dollars, which will translate into huge profits for the U.S. arms industry and its supporting networks, and also pave the way for the complete and absolute domination of space by America.

The 9/11 attacks were carried out by a small group of men armed with no more than cardboard cutters worth a few dollars. This should have demolished once and for all the belief that grossly inflated defence budgets supporting huge armies, nuclear arsenals and a host of expensive conventional weapons can effectively protect ordinary citizens, and yet the so-called 'security' establishment refuses to take cognisance of the fact.

The Future

It is clear that if the scourge of armed conflict and illegal arms trade is to be curbed it cannot simply be restricted to curbing the end-users. For the problem to be effectively rooted out one must go to its source, and in this case to the arms manufactur-

ers in the first place. Second, clear international laws must be developed to curtail legal weapons transfers to repressive governments and to restrict arms transfers to insurgents so that there are reductions in the levels of conflict the combatants are forced to come to the negotiating table. Third, and most importantly, civil society must be shown the truth which lies behind wars, and the fact that political problems cannot be solved militarily. Eventually, after all the fighting is done, the combatants end up on the negotiating table. Civil society must assert that it is better to come to the negotiating table before the intermediate step of war.

International efforts have been underway by concerned governments and NGOs to persuade the largest arms producing nations to be bound by a “code of conduct” for state sanctioned arms transfers. In 1998, the Canadian government floated a proposal for the creation of binding international law to prevent states from providing arms to insurgents without the permission of the government in the host state. The British, Norwegian, and German governments all expressed some degree of public support for the treaty, but the idea was vetoed by the strong opposition of the U.S. government—no doubt pressured by the arms lobby and the CIA—which called it “too inflexible.”

The United Nations Conference on the Illicit Trade in Small Arms and Light Weapons in All Its Aspects, mandated in December 1999 by the General Assembly, was held in July 2001 in New York. But it was considered a near-total failure by the human rights and humanitarian communities. A Human Rights Watch document describes the role of the United States in scuttling what could have become a blueprint for the creation of a more peaceful world order:

“...while the program of action recognized primary responsibility for dealing with the black-market trade in small arms to states, yet did not allude to, much less prescribe, any measures to curb the flow of weapons to abusive actors through the irresponsible arms trade practices of governments themselves.” The document did not codify any standards for the arms trade based on

international humanitarian law or human rights, and made only a few vague references to the humanitarian urgency of the unchecked proliferation of small arms. It did not establish a transparent universal system for marking and tracing weapons, or record-keeping and reporting mechanisms (such as an international public register of small arms transfers). Finally, the program of action was not legally binding, nor did it mandate the negotiation of other legally binding documents, such as a treaty on measures to regulate the activities of independent brokers.

“...From the beginning, it was expected that major arms exporters, including most of the Permanent Five members of the U.N. Security Council, would try to water down any program of action. The surprise was the emergence of the United States, rather than Russia or China, in this respect. The U.S. had itself boasted relatively decent arms trade control mechanisms, including curbs on exports to human rights abusers and measures to ensure transparency. Yet with the change in administration following immediately after the second prepcom in January, the U.S. delegation began taking a blatantly obstructionist approach. An uncompromising U.S. position was articulated in an opening statement to the conference, which shocked most observers and reflected the Bush administration’s disdain for multilateral arms control and multilateralism in general. The statement set down several positions, which were said to be non negotiable, rejecting a mandatory Review Conference, the participation of non governmental organizations, and all “measures that would constrain legal trade and legal manufacturing of small arms.” It was clear throughout the conference that the domestic gun lobby wielded heavy influence in the U.S. delegation, imposing on the conference a belief that talk of international arms trade control would lead to the demise of the putative constitutional right of U.S. citizens to own guns. Other states antagonistic to the conference’s objectives were all too willing to let the U.S. dismantle the conference.”

It is quite clear that conflicts cannot be viewed simply as a problem between the most obvious actors as long as the international arms bazaar exists. To resolve a conflict or at least to scale down the levels of violence and civilian casualties it is imperative that the world's largest arms producers and exporters are held accountable, forced to reduce and ultimately close down their death industries. To flood the world with vast quantities of weapons on the one hand, and to regularly send U.N. Peace Keeping Forces to various conflict theatres on the other is the worst form of hypocrisy that needs to be challenged. And for our own part, the next time we find ourselves joining our venal politicians in beating the war drum and baying for the blood of our neighbours, we ought to stop and think: ultimately, who is going to win— us, the enemy, or the arms corporations?

FUNDAMENTALISM - A GROWING THREAT TO SECURITY IN SOUTH ASIA

Admiral Vishnu Bhagwat

Historical Background

The onset of British colonialism effectively destroyed India's agriculture and industry in the course of just 50 years, 1780-1830. Peasant revolts against unjust revenue impositions on farm land and famines as a result of the disruption of the existing patterns of land ownership and its substitution by British appointed land-lords brought ruin to the village economy.

1857 or India's first war of Independence had little to do with the British invented story about resentment against cartridges with cow and pig fat but more substantively to do with people uniting, more specially the two major communities, to overthrow the exploitative colonial order. British imperialism then quickly put in place the policy of 'Divide et empera' and started propping structures and religious orders that today form the basis of 'Fundamentalism' in the sub-continent. These, first resulted in the partition of Bengal in 1905 and then India itself in 1947. Admittedly both these contrived religious divides led by fundamentalists masquerading as political leaders had some economic underpinnings, but essentially they served imperial interests pre 1947 and thereafter the post 1947 imperial economic and political world order. The transfer of surplus and its accumulation in the imperial countries has been no less and has been documented by Samir Amin in two volumes of his outstanding books.

After Mahatma Gandhi brought the peasants and workers to form the Congress mass base and he transformed it from being a social club to party with mass mobilisation and with a revolutionary agenda of land to the tiller, swadeshi and unity of all faiths, identifying itself with the sentiments of the October Revolution and the Khilafat movement, the Colonial rulers

quickly responded by creating the RSS, SGPC or Akali dal in 1925 and the Jaamat-e- Islami and the Muslim League soon thereafter. Similar religious-political sectional divides were created in Sri Lanka and Burma. Nepal was considered with its monarchical order.

The govt of India Act 1935 with its provision for 'Separate Electorates' laid the foundation for full-blood communalisation of the polity and the poison of communal hatred not only spread in the cities but to the rural countryside. With most of the leaders of the congress Party, then seen as a Freedom Movement, rather than a Party, being put into jail, the Muslim League, RSS and the Jamaat-e- islami worked in close ideological coordination to pose as fundamentalist defenders of the faith. In spite of this Khan Abdul Gaffar Khan, the Frontier Gandhi stood his ground in the NWFP. In 1946 a blatantly partisan electoral machinery engineered a narrow win to those who wanted Pakistan. Only about 4.3% of India's Muslims actually voted for Pakistan.

Significant events took place despite British machinations: the people of Jammu & Kashmir signed the Instrument of accession to join secular India. But in 1948, the fundamentalists, affiliated to the Hindu Maha Sabha and the RSS, after extensive training, planning and preparation, assassinated Mahatma Gandhi, a devout Hindu, in a bid to capture power through the subversion of the State apparatus.

Many of the princely states also wanted to separate and declare themselves independent under British advice. These princely states, as documents and facts have revealed, were the sanctuaries of fundamentalist conspiracies and certainly of Gandhiji's assassination. Essentially the religious sentiments of the people had been exploited for ruling over the masses and retaining the feudal economic and social order.

The British and their allies, the US, Israel and certain political organisations in Europe have continued to provide political, financial and logistic support to anti-state and anti-people forces masquerading under different names, including the Socialist, Samata and Janta Parties in India.

Sri Lanka was the first among the highly literate and welfare state oriented nations to adopt the neo-liberal economic model under President Jayawerdene. The resultant economic decline, injustices and concentration of wealth was a good opportunity to cover up its deficiencies by encouraging national chauvinism and descrimination against the Tamil minority who had until then co- existed happily contributing to a steadily growing welfare state. This reversal of the policies under Jaywerdene led to the VOA agreement, moves on Trincomalee naval base etc. also the Israeli secret service coming into Sri Lanka as proxies to the US. Their support to LTTE is history. The erstwhile imperial powers increasingly played on both sides to foster "ethnic" divides. In fact the word 'ethnic' which had not been part of the political vocabulary or discourse of the subcontinent became the buzz word in academia and media circles.

Just after the assasination of Sheikh Mujibur Rehman, who had a broadly socialistic agenda, the coming in power of pro-US and Saudi-bank rolled, politico-religious alliance, Kazi Nazrul Islam, Rabindra Nath Tagore and the composite Bangla culture became a casualty to the fundamentalist clergy and the military elite who had no economic or political program for the overwhelming majority of Bangladeshis, first exploited by the British, then by Pakistanis and now by their own elite, and being now fed on "Wahabi" practices most of them in conflict with the basic democratic, socialistic, egalitarian principles of the Holy Koran as enunciated by the Prophet. What was being fed to them were half truths ordained by the rich traders and self appointed middlemen who reestablished themselves after the Prophet, and drove enlightened Islam into the wilderness. All this was a cloak for the anti-poor, anti-peasant and anti-worker policies of the post- Mujibur Rehman Governments headed by military generals with close ties to their west Pakistani counterparts.

A short period under Prime Minister Sheikh Hasina sought to change the direction but she was driven out by a coalition of fundamentalist forces. We are back to square one in Bangladesh a nation like the rest of us with desperately poor people.

The decade of the 1980s and the 90s

The years around the 1980s form the baseline of the rapid growth of fundamentalism and its associated movements of terrorism and 'narcotics' trade in South Asia. In fact it was fueled with the profits from gun running and narcotics and increasingly referred to as 'narco-terrorism'.

In the North - East, Punjab and in several other regions of India, Myanmar, Sri-Lanka (LTTE), Nepal and Pakistan, the narcotics business became a prime activity with Afghanistan and Thailand providing raw materials. Religious fundamentalism provided a good cover for all including foreign and domestic intelligence agencies. The CIA and ISI became particularly active in the business and the Taliban their specially protected child. Saudi Arabia provided funds for the Mujahiddin groups and later the United States and Saudi Arabia for the Taliban and the Al Quaeda to fight the progressive minded governments of Babrak Karmal and Najeebullah. Few people at that time saw that Afghanistan was the region where oil and gas pipelines by the famous US oil giant UNOCAL were planned to be laid to pump the oil and gas from the rich fields around the Caspian. The Mujahiddin and the Taliban became the unwitting foot soldiers of the oil companies, in the name of the imposition of a totally distorted so called 'Islamic regime'. Until July 2001 the Taliban salary bill was paid by the US Government. The present regime is also run by the Americans who are only using them to implement their 'Operation Energy Capture' in Central Asia. The post Soviet regimes in Central Asia have been bought off with a few million dollars. The US is hardly concerned with the Fundamentalist groups and their regular forays into J&K, mainland India which serves to saffronise India without any effort. As far as large American oil companies are concerned they have adopted the famous Deng dictum "what difference the colour of the cat as long as it catches the mice (oil)".

Not so surprisingly it was in the late 1980s that through a series of well-calculated but politically low profile moves, fundamentalist groups in India and J&K, acting in coordination, created a situation where the pot was brought to a boil, including Prime-Minister Indira Gandhi's assassination, through

terrorist insurgency in Punjab followed by J&K, and fundamentalist's anti-minority actions in India. Their Jehadi counterparts were fully involved. Hundreds of small and not so small fascist outfits, funded from NRI and Intelligence agencies and groups in UK, USA and Europe began to assert themselves in an aggressive manner via the Ram Mandir movement, demolition of the Ayodhya Masjid, having infiltrated the State apparatus over the years. The main political parties squabbling for power, permitted the fundamentalist outfits political and parliamentary space. As Pakistan based fundamentalist groups, terrorist outfits and narcotics flows increased, so in direct proportion grew the illegal but overt activities of the Bajrang Dal, Vishva Hindu Parishad (VHP), Durga Vahini, Hindu Munnani, Shiv Sena etc who became a law unto themselves, with the entire State apparatus, the administration, police, customs and the judiciary looking the other way, forgetting the existence of the Constitution, the laws of the land and even criminal liability. Even the march 1993 bomb blasts in Bombay were in collusion with fundamentalist outfits on both sides, the law enforcement agencies bribed into silence. Fundamentalism flourishes under a criminalised political economy as a 1994 UN Report describes and here the mafias and the fundamentalist were not only together they were exchangeable in mind, body and soul. The saffron clad 'Sadhus' were the new narco carriers and retailers. Several Corporate groups have also joined in this 'Great Diversion' to take attention away from the 'Great Bank Robbery', the latter is really the great loot of the poor. Narcotics has been bank-rolling, money laundering black money, Hawala, as was so visibly seen in the Jain Hawala Diary case. The mafias dominate the scenario. Places of worship provide a good cover for these activities. The State is not unaware of it.

However, the activities of the fundamentalist and their terrorist counterparts came to a full bloom with the onset of the Liberalisation, Privatization, Globalisation period in both Pakistan, India and the corresponding dispensations in Nepal, Myanmar, and Sri Lanka in somewhat different degrees and time periods.

The operations launched in Yugoslavia, Russia, Turkey, Indonesia, Philippines and Latin America, Africa were skillfully camouflaged as domestic mismanagement. The Corporate media played a major part in the cover up. In fact the most significant development aiding and abetting Fundamentalists has been the surrendering of their economic sovereignty and decision making by Governments. The IMF- Government of India Agreement of 1991 is a good example. Such agreements were signed by a large number of countries, including the ones named above.

Under the IMF - World Bank tutelage the Union Minister of Finance reports directly to 1818 H Street NW Washington DC. The Union Budget text, formally written by Indian bureaucrats in Delhi, has become a repetitious and redundant document Its main clauses are included in the loan agreements signed with the IMF.

While India did not experience hyperinflation nor the collapse of its foreign exchange market; the social impact in a country of 900 million people was devastating. In India the IMF program initiated in July 1991 directly affected the livelihood of several hundred million people. There was evidence of widespread chronic starvation and social destitution, which resulted directly from the macro-economic conditional ties of the Structural Adjustment Loans.

The 1991 New Economic Policy which was predicated in the Structural Adjustment Loan December 1991 cut spending on social programs, eliminated state subsidies and price support programs, sell off the more profitable public enterprises to large business and foreign capital, liberalisation of trade, free entry of foreign speculative capital used for acquisitions and mergers, and reforms in the financial sector to alleviate its foreign exchange difficulties and pushed the economy into a 'stagflation' (the price of rice, for example rose by 50% and other agricultural inputs between 4 to 7 times, while the influx of imports in luxury consumption rose, pushing a lot of domestic producers into bankruptcy. The G-7 were anxious to 'export their recession', abrogate India's Patent Law of 1970, as well as like in Argentina they were poised to takeover large

portions of the Indian economy. So what better way to fool the Indian people than fundamentalist forces raising non-issues to throw dust in to the eyes of the half-starving, half blind, half clad people. Loss of jobs made people desperate. so orchestrate a fundamentalist 'tamasha'. Effectively we had been subjected to 'economic genocide' or economic terrorism, through falling jobs, falling wages and falling demand, with dumping of foreign goods, which Gandhi ji had called 'Adharma'. The economic program added to embittering religious strife. Both Hindu and Muslim fundamentalist feed on the poverty of the masses like fascist vultures.

The International Monetary Fund (IMF)'s monitoring team in Delhi receives key data on 40 economic variables every quarter. The IMF also has the ten 'structural bench-marks', pertaining to broad areas of structural reform which are to be addressed by the Government of India (and Pakistan etc.) and reported to the IMF for future loan agreements also. Thus the Governments of South Asia are in a strait-jacket and no longer in control of official and monetary policy.

Key documents like the 'Memorandum of Economic Policy' of 27 August 1991 together with the covering letter addressed to the IMF Managing Director, Mr Michel Camadessus was drafted in American script.

It is necessary to repeat that all South Asian countries are bound hand and foot to the IMF-WTO and the US Treasury, and their partners the US multinational companies.

Dismantling former Yugoslavia, recolonising East Europe, third worldisation of Russian Federation are instructive case studies for every South Asian. Washington's intervention in this regard has been formalised in the National Security Decision Directive NSSD 133, entitled United States Policy towards Yugoslavia, labeled "Secret Sensitive" of 1984. It confirmed a previous 1982 NSSD5 for East Europe, to overthrow communism and reintegrate the countries of East Europe into a market economy for the benefit of the MNCs, Western banks and financial institutions.

The process in Yugoslavia initiated in 1988 is instructive:

1. Runaway import liberalisation which devastated Yugoslav industry, under Prime Minister Ante Markovic, a US stooge who promised a positive policy of support to manufacturers but did exactly the opposite.
2. The Central Government, in view of the pressures of debt servicing, vitiated by import liberalisation, was directed by the World Bank and IMF, on behalf of creditor nations, to suspend payments due to the Federated republics and regions which fueled the process of balkanization and secession as resentment mounted in the various regions and created a de-facto secession by Croatia and Slovenia in June 1991, egged on by NATO and West Germany.
3. Massive privatization of all socially owned oil State sector enterprises and sale to Western purchasers was insisted on at nominal book values, as part of the restructuring program.
4. Supporting legislation drawn by Western Financial Consultants and lawyers to safeguard the "rights of foreign creditors" was hastily introduced, and unrestricted entry to foreigners permitted not only on industry, but in banking, insurance and service sectors.
5. The entire Nationalised Banking Sector was dismantled.
6. Practically one-half of the workforce or more was laid off due to privatization.
7. Ethnic strife and ethnic cleaning with the strategic objective of the break-up of Yugoslavia was actively supported by funding and supporting of violent secessionist groups by Western Intelligence Agencies, training and hiring mercenaries. Bosnia was turned into a base by driving of "Arab/ Afghan" fighters trained in the killing fields of Afghanistan and the Kosovo Liberation Army and its Al Qaeda arm, financed through drug trafficking, white slave traffic and supplied with unlimited arms.

8. The November 1995 Dayton Accord, initiated by the US and EU installed a full-fledged colonial administration (a la Andhra Pradesh) in Bosnia with expatriates. Article 7 of the Dayton Accord stipulates that the first Governor of the Bosnian Central Bank will be appointed by the IMF and will not be a citizen of Bosnia or Herzegovina.
9. The entire, inflated, so-called peace-keeping are to be paid for by now autonomous republics and the debt has been proportionately divided between them. Oil exploration has begun in Bosnia by the American oil company, AMOCO.
10. The territorial division under the Dayton Accord of 1995 sanctions the partition on ethnic lines, for which the nine heavily armed brigades, termed "peace-keepers" who are to ensure the ethnic division of Yugoslavia have been deployed.

Globalisation, which is an euphemism for US Imperialism or 21st century capitalisms unambiguous in its stated aims and objectives as spelt out in the Lugano Report by Susan George in 1999, by Pluto Press, London. The Multi National Corporations (MNCs) will dictate the agenda of the World Trade Organisation (WTO), itself backed by the IMF and Department of the US Treasury. The import tariffs, customs duties, abolition of quantitative restrictions (QRs) for developing countries, while retaining massive subsidies, import quotas, export support will be the prerogative of the US and the West. Abolition of QRs , dumping of food, in particular Genetically Modified (GM) foods, monopoly and marketing of seeds, stealing of germ plasmas, bio-diversity, imposition of Patent laws, while retaining sovereignty of domestic US legislation will be the US prerogative. Laying down Competition Policy, Contract Law, and imposition of a legal framework to protect their own companies unfettered rights; property and monopoly pricing are already in various stages of implementation.

Abolition of QRs through the Agreement on Agriculture of December 1998 between the US and India is a death warrant on the lives and livelihoods of our farmers. These are all the by-

products of what is being referred to as 'market fundamentalism' and 'economic terrorism', hiding behind the smoke screen of Religious Fundamentalism.

When economic decision making, including the nature of import duties, tariffs and taxes are approved in Washington in November of each year, politics of the Ruling Party and the parties in the opposition begins to function in a vacuum. As Tge Lugano Report so well describes we then have no other politics left with the Political classes except the politics of Hatred and Identity politics, so that communities, regions, states, cities, mohallas(streets), neighborhoods and villages are constantly encouraged and organised to be at each other's throats.

Since the myopic, subservient political groups often acting as the sub-contractors of the US and the MNCs, have no other ideals or national interests, they share the loot and whisk it abroad through 'Private Banking' and OCBs the new respectable money launderers of the foreign banks; the working people of South Asia end up as recruits in the increasingly funded para -military and security related forces spending in a phony war like the 'Aar Par Ki Ladai' of India's PM. Pakistan and India are the mirror image of each other. On paper the Pakistan President's advisers may not be fundamentalists, here in India every member of the Central cabinet belongs to a fundamentalist outfit. Similar developments have taken place in Bangladesh and Nepal.

'The Lugano Report elaborating on 21st century capitalism or neo liberalism framework describes further that while some elements of 'law and order' jails, the judiciary will remain out of the control of WTO; the international banks, currency and financial institutions industry and even intelligence agencies are going out of the control of elected governments, The Lugano report further rightly emphasis that any political order requires a military enforcement mechanism. The Pentagon with the National Security Agency and an enlarged NATO seem destined to play such a role. It is envisaged that it will maintain trustworthy, second tier, military establishments in certain client states in the culturally diverse, non-western civilisational area.

The report further goes on to suggest that Informational Technologies will be paramount in the construction and consolidation of a renovated world order. Elites are already connected through dedicated networks and these links will necessarily be reinforced as the need for global political consultation and management becomes even more apparent. Information Technology will enhance surveillance, infiltration and disruption of any nascent opposition.” Budgets and fiscal deficits and trade policies are out of the ambit of the Central Govt. As this is happening the political class and those in power at the Centre are resorting, directly or indirectly, to divisive politics, based on religion, caste, perceptions of real or imaginary historical grievances, which are being encouraged by identity and hate politics. In this concept ideally individuals should identify with an ethnic, linguistic, racial or religious sub-groups to the detriment of self definition as a national of any country or professional caste of that nation, much less as a part of the ‘human race’. The notion of citizenship at any level is to be discouraged. These narrowly defined groups have general access to communications media, with group specific outlets, established and financed wherever they do not occur spontaneously. All fundamentalists, Christians, Jews, Hindus, Muslims and supremacists with all their newspapers, magazines, radio, TV, websites, all pre-occupied with their rights, including the right to a separate State. The goal is to emphasis fragmentation, to underscore their differences with others and erect ghettos, whether they have basis in factor tradition (contrary to received opinion most identities, particularly the so called ethnic ones, have shallow historical roots and more often than not are of recent historical construction). Identities are very much like God; even if they do not exist, they are extremely powerful—so much so that people will kill in his name. This has very grave consequences for the integrity of the country, as our secular fabric is the real guarantor of peace and development and in essence of National Security.

Back to South Asia, a sub- continent with the largest mass of 1.5 billion people, once one country, now three and more. Pakistan is avowedly a self-proclaimed theocratic state and

Bangladesh is gravitating towards theocracy, India also not too far behind in the last 5 years.. We account for more than half the world's hungry, diseased, homeless, illiterate, unemployed or at least largely unemployed, struggling to find one meal a day, half -naked , malnourished with our women and children at the lowest rung of animal existence, no news to the 'Doctors for Peace and Development' Even without religion, which in Gandhi ji's words means nothing to the hungry, we are pursuing rituals served to deceive the poor by the merchants of Religion. This when mixes with politics makes an explosive mixture of violence the very anti-thesis of man's quest for peace and ahimsa. The latest results in Gujarat show how easily hate is packaged and marketed, and sold, the Amul Co-oprative Dairy movement regarded as a tribute to Dr Kurien has fallen into disaster where even the woman with the single buffalo preyed on her neighbour in Anand and Kaira. Add to that the VHP, with its head quarters in Washington and London is organisationally spread out with State support to not only practice genocide but its most pernicious form of "apartheid". To think that this is Gandhiji's land. VHP's Ram Rajya is effective with direct state support in 9000 out of ten thousand villages in the State. We also now have some hundred thousand village home guards to maintain law and order, those who killed, maimed and raped women and children are the direct guardians of the people and paid salaries out of the State treasury. This is the highest Rajya dharma that we have seen since our civilisation took birth. This is Hindutva. The VHP along with other sister organisations of the Sangh receive unaccounted bounties from foreign lands and foreigners including big names of the Corporate world exactly as the Nazis received their funding from the Corporate in the US and other western democracies. The Chief Minister who should be in Jail or before the International Criminal Court says he is also raising a force in the border districts to fight terrorists, his bungalow is situated next only to the Swaminarayan temple of Akshardham. We could go on with describing how the non -state actors of the fundamentalists are now the special Intelligence Bureau of the Party. How they will now certify the "anti-nationals' in UP as they have been doing. The traitors of the Freedom movement

are now the officials who will cancel our citizenship or better still classify as class two or class three citizens.

Those of the hitherto silent majority who have seen our Constitution torn to shreds and the Rule of Law thrown into the dust bin need to make up our minds whether this is an assault on the security of the people, their families, their neighborhoods and the Country's security itself and organise accordingly just as Gandhiji taught us . Do we become his Satyagrahis again? Gandhi ji's non violent struggle based on Satya or Truth is invincible, though realistically it also means the coercive apparatus with the Fascists, in Fundamentalists' clothing will break many bones and burn many habitats. But if we continue to succumb to chauvinism to set one people, against each other than we are slowly destroying our future, our children and ourselves with our own hands. This is what happened in Shri Krishna's kingdom of Dwarka.

At the levels of professionals too - doctors, nurses, engineers, artisans, plumbers, metal workers, weavers, kisans and landless workers, hundreds and thousands of professional guilds that flourished centuries ago, our cooperatives, our women, our adivasis and the minorities and dalits who are already or soon will be the victims of the thugs , mass murderers who masquerade in the garb of holymen but are frauds and cheats and spread hate and set fire to the land and country we love, if we can join hands, surely we are the democratic majority. Bapu's Talisman, his definition of Dharma, his organisational skills in creating the largest mass movement against Imperialism is our inheritance. How can the Fundamentalists the flag-bearers of Fascism, stand against the non-violent march based on Dharma.

First they came for the Jews
and I did not speak out -
because I was not a jew.

Then they came for the communists
and I did not speak out -
because I was not a communist.

Then they came for the trade unionists
and I did not speak out -
because I was not a trade unionist.

Then they came for me -
and there was no one left
to speak out for me.

Pastor Niemoeller (Victim of the Nazis)

WHY DETERRENCE WON'T WORK IN SOUTH ASIA

Praful Bidwai

The continuing—and shocking—disclosures about Pakistan's clandestine transfers of nuclear technology to North Korea, Iran and Libya once highlight both the irresponsible behaviour of nuclear weapons-states (NWSs) and the uniquely high nuclear danger in South Asia.

What Dr Abdul Qadeer Khan and his colleagues at Khan Research Laboratories (KRL) in Kahuta accomplished was the erection of one of the most well-organised, complex, and relatively successful networks in the world to smuggle nuclear weapons technology to other countries—perhaps the greatest instance of clandestine nuclear collaboration since the reported cooperation between Israel and apartheid South Africa to develop the Bomb. It may be the most ramified secret nuclear network created anywhere since 1945.

The coming to light of substantial facts about Pakistan's clandestine nuclear commerce, followed by Dr Khan's public confession, has serious implications not just for South Asia, but for the whole world. It also has consequences for a number of security doctrines on which states base their “national defence” strategies.

South Asia's actual experience with nuclear weapons since the tests of May 1998 has already blown holes through a number of assumptions and predictions by supporters of the Bomb. For instance, they claimed that nuclear weapons possession would “stabilise” India-Pakistan strategic relations and make conventional conflict between them virtually impossible. Nuclearisation would induce “sobriety” and “maturity” in their leaders and discourage adventurism.

The very opposite happened. Within a year of conducting their nuclear tests, the two states fought a shooting war, a mid-sized military conflict, across the Line of Control at Kargil in Kashmir. This involved top-of-the-line weaponry and over 40,000 troops, and led to over 1,000 deaths. This was indisputably the world's *most serious conventional conflict* between any two NWSs. It was triggered off by the Pakistani generals' planned intrusion into Kargil—itself caused by adventurism rooted in their newly acquired nuclear-weapons status.

In 2002, India and Pakistan were again in an eyeball-to-eyeball confrontation at the border, lasting for 10 prolonged months, with one million troops. India launched the build-up with the intention to punish Pakistan for its suspected (but unproven) encouragement to terrorists who attacked India's Parliament building. They both resorted to blatant nuclear brinkmanship, belying the claim that “sobriety” and “maturity” would prevail.

If these two episodes alone undermine expedient rationalisations offered for the nuclearisation of South Asia, the latest disclosures of clandestine commerce all but demolish them, besides highlighting the extremely high risks of proliferation associated with the crossing of the nuclear threshold.

This must be seen in context. Pakistan's nuclear smuggling must be condemned. Dr Khan's role must be seen as nothing short of recklessly criminal. But other NWSs too have been involved in nuclear proliferation in direct or indirect ways—as recipients or providers of nuclear materials and technology or in condoning nuclear transfers. They are all irresponsible in different ways and to different degrees.

In the early years of Cold War, the USSR and China collaborated on nuclear weapons technology, as did the United States and the United Kingdom. In the 1960s and 1970s, France is believed to have helped Israel acquire a nuclear capability. Israel and apartheid South Africa too collaborated on the Bomb.

Nuclear collaboration between China and Pakistan was reportedly very close. India too borrowed or procured by dubious means vital ingredients of its nuclear weapons programme from the US and Canada, while using materials from sources as diverse as the UK, US, USSR/Russia, Norway, France, China and Canada. Similarly, the US has been indulgent towards the nuclear pursuits of its allies Israel and Pakistan. And India is now keen to collaborate with the US and Israel on nuclear weapons in general and Ballistic Missile Defence in particular.

It is illogical to divide the NWSs into supposedly “responsible” and “irresponsible” states. Possessing weapons of mass destruction and drawing up plans to use them is a grave act of irresponsibility and criminality in the first place. Besides, the NWSs have taken new initiatives in making the world a more dangerous place. For instance, the US is planning to militarise outer space through its Ballistic Missile Defence programme. It is also planning to develop battlefield nuclear weapons, which will further raise the global nuclear danger.

With all these qualifications, South Asia nevertheless stands out as the region where the likelihood of use of nuclear weapons is high—far higher than anywhere else, or in relation to the Cold War after the Cuban Missile Crisis of 1962. India and Pakistan are strategic rivals who have sustained an unrelenting hot-cold war for more than half a century. They both made a grave and potentially catastrophic blunder in embracing a notion of security involving dependence on nuclear weapons, specifically the doctrine of nuclear deterrence. Deterrence is fraught with both generic and region-specific problems.

Nuclear deterrence might appear attractive as a commonsense-consistent idea: if you can threaten your adversary with “unacceptable damage” in case he attacks you, you can deter or prevent him from attacking you—and thus become secure. In reality, deterrence is only a *rationalisation* for the existence, maintenance and perpetuation of nuclear arsenals. Nuclear weapons did not *create* the reality of deterrence. Deterrence was in-

vented to cope with the *reality* of nuclear weapons! Nuclear deterrence is an ideological *outgrowth* of nuclear armaments, their *ex post* strategic rationalisation.

There are generic problems with deterrence of any sort. To rely on deterrence is to seek peace or stability by generating fear and hostility in the opponent. This heightens mutual tensions. Deterrence does not seek to bring about peace through cooperation or mutual threat reduction, but through the very opposite route. The contradiction inherent in deterrence—of tying up war avoidance to war preparation, and seeking security through promotion of hostility—is not necessarily fatal in the case of conventional weapons. But it is guaranteed to be fatal with nuclear weapons. Their use spells catastrophe, colossal destruction, mass murder.

Nuclear weapons have no “positive” strategic value. They can never be used to directly protect a country or achieve security. One can only *hope* that possessing them will frighten a rival (which possesses them too) into not using his nuclear arsenal against one. In essence, this is only a hope.

Of course, nuclear weapons may temporarily deter because of their frightening character, but they can never deter *certainly*, *confidently* or *enduringly*. Those who believe that we must always live with nuclear weapons are even prepared to claim that nuclear weapons can deter permanently. Deterrence attributes both peril and hope to nuclear weapons. The peril is real, the hope an illusion.

Every single state—and India and Pakistan are no exception—that claims to base its security upon the efficacy of nuclear deterrence—i.e. *non-use* of its nuclear weapons, and only on the *threat* of their use—has a doctrine for *actually using them*. All NWSs’ nuclear doctrines are about the circumstances, conditions, etc., in which these horror weapons will be used—to inflict “unacceptable damage” by killing tens of thousands of non-combatant civilians in the adversary nation. Thus, both India and Pakistan may talk of averting the use of nuclear weapons,

but both are building command and control structures and alternative chains of authority on the assumption that they *will* use them.

In truth, one can never *fully* control the conditions in which deterrence is supposed to operate successfully. That is why to subscribe to nuclear deterrence as a doctrine or belief system and to pin one's hopes for security on it, is nothing but an *irrational act of faith*.

In theory and practice, nuclear deterrence is fundamentally unstable and degenerative in character. There is, first, the security-insecurity paradox, where one state searches for security by making its adversary insecure and by generating hostility through threatening the other side with enormous physical and material damage.

Nuclear deterrence demands perfect knowledge of and faultless predictability about an opponent's behaviour, as well as his strategic capabilities, doctrines, etc. This is a demand for repeated, regular, institutionalised predictability and symmetry in a whole possible chain of moves and counter-moves. This is practically unachievable. States have vastly different notions of what level of damage is acceptable and what is unacceptable. Their perceptions of each other's capabilities greatly vary.

The India-Pakistan case is replete with examples of how strategic assessments differ widely. Many Indian policy-makers, for instance, greatly discounted Pakistan's widely reported nuclear capability from the late 1980s all the way until May 28, 1998. Some convinced themselves within a week of the Indian tests of May 11-13 that Pakistan did not have the Bomb; or else, it would have exploded one. Indian Home Minister L.K. Advani's notorious warning on May 18 that "geo-strategic" circumstances had changed in India's favour was a clear instance of this.

The story of India-Pakistan hostility is marked by a lack of transparency and by misperceptions about each other's strategic doctrines and intentions, and miscalculation. Nuclear deterrence

assumes that there will be no strategic miscalculation—not most of the time, but *at all times*, that generals and admirals will never panic or overreact even under grave provocation or when a crisis becomes imminent. This assumption is unrealistic.

Take the assumption about symmetrical perceptions of “unacceptable damage” implicit in nuclear deterrence. The killing of tens of thousands of citizens may constitute “unacceptable damage” for one state. But even the razing of half a dozen cities may not be “unacceptable” to its adversary’s policy-makers, some of them may imagine that their nation can “absorb” such devastating strikes and still “survive”—whatever that means!

For nuclear deterrence to be effective, it must be *credible*. The possibility of use of nuclear weapons must be real. Your opponent will not be deterred if he believes that you will never use your weapons. Thus, both the *capability* and the *will* of the deterring country must be beyond doubt. The “enemy” should be certain that his opponent will use nuclear weapons if pushed to the brink. This creates powerful pressures for the generation and sustenance of both an enduring politics of nuclear-related hostility including nuclear brinkmanship and an arms race. This spells uncertainty and instability.

Nuclear deterrence is fraught with yet another danger, which is highlighted by Organisation Theory. Contemporary Organisation Theory argues that organisations (and it is organisations, not states, that actually control nuclear weapons systems) function within a severely limited form of rationality. They have three characteristics. They show “interactive complexity”, or numerous interrelated but unplanned interactions which are not easily comprehensible. This is because their various units operate according to routines and standard procedures and rules, not according to individually reasoned decisions.

Complex and large organisations have “tight coupling” systems that are very time-dependent and have invariant sequences. The system has little slack or flexibility. Then

there is the third trait: there will always be conflicting objectives within an organisation. This makes accidents “normal”. Nuclear weapons are a classic instance of accident-proneness. Deterrence can fail.

Nuclear deterrence also poses a special control difficulty in the India-Pakistan case. The two are close neighbours, with no *strategic* distance worth the name between them. Early warning systems are useless in their context. Missile flight-time between their big cities is as little as 3 to 8 minutes. This renders any crisis defusion or correction of misperceptions virtually impossible. The only response of their militaries to reports of an imminent attack would be to launch or retaliate on warning.

This problem is hardly remedied by the woolly idea of a “minimum” deterrent. One’s own “minimum” is contingent on the opponent’s capabilities and levels of preparation. There is no such thing as a “stable minimum posture”. This is always a moving, not a fixed, position. This is confirmed by the whole history of the arms race between the US and the former USSR. For instance, India’s “minimum” for China will vary from its “minimum” for Pakistan.

Nor does the Indian commitment of “No-First-Use” help in making a nuclear arms race in South Asia more safe or sustainable. India has diluted its own NFU concept from the original formulation in 1998. Its nuclear doctrine now says its NFU pledge does not apply to non-nuclear weapons states which are members of an alliance with a nuclear weapons power. India also reserves the “right” to use nuclear weapons against an adversary which attacks it with chemical and biological weapons.

Yet, even in the original *avatar*, India’s NFU was no recipe for stable deterrence. Pakistan’s strategists have always viewed it as an arrogant assertion of India’s capability to inflict a second strike on Pakistan after absorbing a first strike. This has only strengthened the hawkish argument that Pakistan must have a doctrine for the early use of nuclear weapons, as an insurance against being overrun by India’s conventional forces—and as

a last, desperate means of deterring (?) an Indian strike. (There is a deep irrationality here. But that is another matter.)

There are two special nuclear dangers in South Asia. The first is that a deterrence equation will break down, and nuclear weapons will become tools of foreign policy for both India and Pakistan. Their function would be extended to “foreign policy support”, “damage-limitation capability”, “escalation control”, “prevention of conventional war” and “global prestige”. This has already happened on many occasions.

The second danger pertains to the possibility of an accidental or unintended nuclear strike. The military establishments and physical infrastructures in India and Pakistan are marked by frequent accidents, component failures, substandard designs, poor maintenance and unsafe operational practices. This raises disturbing questions about the working of any kind of mutual deterrence equation, indeed its feasibility and viability.

The subcontinent is notorious for poor or mediocre engineering capabilities. Substandard manufacturing practices, which lead to a high occurrence of defects, are rampant in Indian and Pakistani industries, especially defence production factories shielded from public scrutiny and safety audits. India and Pakistan have among the world’s lowest indices in physical infrastructure development.

Over the past decade, the Indian Air Force has lost 200 warplanes in largely avoidable accidents. Among the most accident-prone planes flown is the MiG-21, known as its “workhorse”. Over 40 per cent of IAF accidents are reportedly caused by technical defects primarily attributable to substandard spares.

There is little quality control on spares in the Indian military. Many are bought from dubious dealers. Newspapers have reported “a major racket” in the purchase of spares, especially for transport planes and helicopters, compromising flight safety and operational readiness. Often, the armed services lack a developed system for reporting and analysing accidents and failures.

Pakistan may be no better than India as regards safety. Its engineering capabilities are certainly inferior. In fact, Pakistan witnessed the subcontinent's worst military mishap in April 1988, when a huge ammunition depot at Ojhri, near Islamabad, blew up, killing over a thousand people and injuring many more.

India and Pakistan both face problems arising from a poor safety culture. Both are disaster-prone societies, marked by high rates of accidents and mishaps, sloppy precautionary planning, little disaster forecasting, poor emergency procedures, and grossly undeveloped relief-provision infrastructures.

The frequency of industrial accidents in India is estimated to be four times higher than, say, in the US. Fatalities in road accidents in India (as a proportion of the number of vehicles on the road) are 10 times higher than in the OECD countries, and in Pakistan 13 times higher. The important point about a generally poor safety culture is simply this: If Indian and Pakistani engineers fail to control and reduce the frequency of mishaps in relatively less complex and "loosely coupled" system such as road traffic, then they cannot inspire much confidence that they can manage highly complex, "tightly coupled" systems such as nuclear weapons and associated command and control structures any better.

India's nuclear power programmes is run by the same agency—the Department of Atomic Energy—that is responsible for making nuclear bombs! The DAE has an appallingly poor safety record. One of its worst accidents involved the collapse of a safety system, no less: the containment dome of a nuclear reactor under construction. (The dome is supposed to prevent radioactivity releases into the atmosphere in case of a reactor accident.)

Indian and Pakistani missiles and warheads too pose their own safety problems. These are unlikely to be easily resolved, given the clandestine nature of nuclear and missile programmes, and official anxiety to avoid detection and publicity. It is far from clear if India conducted, or was in a position to conduct, "one-

point safety” tests for its nuclear warheads. (Pakistan probably lacks the capacity.) In the absence of such tests, the likelihood of an accidental detonation of a nuclear bomb during fabrication, transportation, installation or flight could be relatively high.

Nuclear deterrence has always been a problematic doctrine. It has rarely provided security to anyone. In the India-Pakistan case, it may come tied up with a potentially ghastly catastrophe—the first use of a nuclear weapon since 1945.

VIOLENCE, MILITARIZATION AND HEALTH: PERSPECTIVES FROM NEPAL

Dr Mahesh Maskey

Nepal, a South Asian country known for its peace loving and friendly people, now enjoys the reputation of a conflict-torn nation where violence is becoming a norm rather than exception. Facing the challenge of eight years old Maoist 'people's war', militarisation of the state has taken a giant stride, outdoing Maoists' Killing by more than two fold. Of the total death count of 8295 until mid November 2003, human right organizations have held Maoists responsible for 2698 and military for 5597 deaths in this sanguine war (INSEC, 2003). The killing continues, and with the arrival of Belgium FALs and US M-16 submachine guns, international observers have cautioned that military backing by foreign powers may turn "this tiny country of 25 million into a counter insurgency blood bath" (Hallinan, 2004).

Such caution has to be measured in the light of recent enthusiasm of Nepali government for a new "Unified Command" to guide state handling of Maoist insurgency. A unified command is usually understood as a mechanism for co-ordination between army and the police in the counter-insurgency operation and is not a new phenomenon in itself. But critics point out that "the present mechanism is just more dignified name for military rule. The unified command signifies the scale of approval and governmental authority to militarization that has now become country-wide in scope. People are being killed on suspicion without verification of their antecedents, and houses are being raided without judicial warrants" (Roka H. 2003). "Poverty in South Asia" report sums up this scenario by saying "militarization has been the system of governance in Nepal". (SAAPE, 2003:144).

Human right violations by the military are a well-accepted fact (AI, 2002; Norris, 2004). Military's recent Killings and burial of innocent citizens has raised public protests and demands for justice (Kathmandu Post, 2004). Maoist insurgents are on the other hand accused of "spree of killing, looting and terror that has accompanied the "people's war" (SAAPE, 2003:144). Civilians have been injured and killed in misdirected hits on military targets. People very often find it difficult not only in distinguishing the camouflaged dresses of Maoist combatants and the military but their conducts also. Maoists issuing death warrants to rival politicians has shocked and terrorized the nation. There appears to be a competition in violence, perpetually justifying their own brutality by pointing to brutal acts of others. Given the Maoist's agenda of social change and claims of humanity, such records fall flat on their face, creating their image at par with the militarized state they are trying to destroy.

In this context violence is fast becoming a major determinant of mortality and morbidity in Nepal. Apart from killings, the physical and mental torture associated with violent conflicts, mutilations and war injuries, shortage of food and essential medicines in the conflict areas, violation of ethical practice of health professionals in carrying their professional duties are some of the direct consequence militarization on health. In terms of resources that are being diverted to defense instead of social welfare, for example seven fold increase of military budget in 12 years from 1990 (\$15 million to \$ 100 million), the impact of militarization has been devastating in a country caught in pincers of poverty trap (SAAPE, 2003:144).

Poverty trap: the historical continuity

Nepal though small in area is a land of enormous geographical cultural and ethnic diversity. Cultures flowered and enriched Nepali history with religious syncretism, even though the society mainly harbored pre-feudal or feudal relations. With the coming of British in India and after Anglo-Nepal war concluding into Sugauli treaty in 1816 AD, the feudal rulers of Nepal started aligning with British colonialists. The rise of Rana autocracy and conversion of Nepali citizens into mercenary soldiers

of British army was one manifestation of the alliance of interest between the foreign imperialist power and local feudal rulers. Nepal was never formally colonized as other countries in South Asia, but it carried the yoke of a century old Rana autocracy, which in effect served as a loyal contingent of British colonial masters. They ruled in the name of the king who was reduced to the status of a figurehead. When the mounting challenge of independence movement in the South Asian region forced British to set India and Ceylon free, Rana rule inside Nepal also became severely weakened and ultimately succumbed before the February revolution of 1951.

At the dawn of 1951 revolution, Nepal like other South Asian countries inherited abject poverty and appalling health status of its people. For the estimated 8.5 million people of the country, life expectancy was 28 years. Infant mortality rate was 255/1000 live births. The country was dominantly agricultural with only a few urban municipalities. Malaria, Tuberculosis, Cholera and other water born diseases were major public health problems, so were Helminthiasis, Hoiter and other nutrition related diseases. This health scenario was largely related to poor environmental sanitation, in adequate safe drinking water and nutritional deficiencies. Therefore the task of improving health status of the people was intimately bound with Nepal's efforts to develop itself socio-economically. Such aspiration of post 1951 Nepal suffered a major set back in the years that followed the aftermath of revolution mainly because the settlement between the contending powers of 1951 revolution was not secured by a decisive victory but by a compromise mediated by the government of India. The compromise safeguarded Rana's economic interest and to some extent political interest too. As per ironic twist of history, the last Rana prime minister also became the first prime minister of democratic Nepal.

February Revolution of 1951 did signal the transition of political power from Rana autocracy to a democratically elected government. This transition, however, was marred by many difficulties the foremost being collusion of national and democratic interest of post-Rana Nepal with the entrenched feudal heritage

as well as India's political, economic and security interests. The political dispensation was such that the king, put back on his throne by revolution, gradually led to enjoy absolute power, though the polity was considered democratic. This absolute power was dependent on the support of government of India who exercised its will through its advisors (Panday, 2000: 312). Whatever political freedom there was in the first few years of democratic Nepal it could not translate itself into socio-economic development. This stagnation, or at best the slow pace of development in all spheres of Nation's life invariably affected health sector also. Nepali politics took a major turn at the end of 1960, by systematically limiting and even forbidding the democratic rights of the people. Nepal's first elected government was dismantled and political parties were banned, establishing what was called as the "party less Panchayat system", a queer mixture of rhetoric of national sentiments, pseudo-socialist economic goals, and fascistic political culture. This was the end point of a cumulative process that gradually facilitated the monarch to exercise absolute power upon a democratic polity. Just a decade ago, in the charged atmosphere of new found freedom and democracy immediately after the defeat of Rana rule, King Tribhuvan had promised that "the country would thenceforth be ruled under a republican constitution crafted and approved by a constituent assembly of elected representatives of the people" (Devkota, 1979). From such beginnings, Nepali politics indeed took a long swing backwards. Thirty years after, the pro-democracy movement of 1990, popularly called *Jana Andolan*, ousted Panchayat and reinstated multiparty democracy. It also made Monarch constitutional and inscribed people as the source of sovereign power in the new constitution.

However, all these major political changes could not bring changes in the socio-economic life of the people. The new rulers tried to install democracy while keeping the feudal relations intact. Roots and historical continuity of poverty lied in these obsolete feudal relations that would grant unlimited privileges to the elites and keep a vast majority of the people in impoverishment. Struggle for democracy was often the struggle for the power to do away with these relations. Democracy is often dis-

mantled when there is a conflict of interest between democratic aspiration and continuation of these relations. Both Maoist war and the recent explosion of pro-republic demonstrations of political parties and students, after the dissolution of cabinet of ministers by King's decree on October 4, 2002, can be understood in this background.

Food insecurity and debt burden

Until 1970, Nepal was not only self supporting but a food exporting country. Food production started to decline in 1980 and in spite of its Basic Minimum Need policy which aspired to take Nepal to level of "Asian standard", the food shortages escalated forcing government to spend \$ 69 million in food import. Even after the demise of Panchayat and rise of the new era of democracy, in 1996 Nepal spent \$95 million. And at present since GDP is not negative (-.06% in 2001/02), the food imports is expected to be relatively higher (PSA2003). Increase in shortage of food has consistently accompanied the increase in the income gap between the rich and the poor. Glaring disparities in land ownership [only 9% of total agricultural land was owned by 40% of agricultural households (NESAC 1988; quoted in Panday, 2000:79)], was compounded by the fast pace of inflation and unemployment. Now the gap has increased, the richest 10% earn 9.3 times more than poorest 10% in Nepal which is second only to India (9.5) in South Asian countries. Population below absolute poverty line is 38% second only to Bangladesh (49.8%).

While riches were concentrated in few hands the debt burden on the nation increased by leaps and bounds. Currently Nepal is recipient of highest amount of foreign aid in South Asia as percentage of Gross National Income (GNI) (SAAPE, 2003:128). As the grants have decreased and loans increased the foreign debt has increased simultaneously. Public debt of Nepal increased seven times within eight years of restoration of multi-party system (Sharma et. al, 1998). It is estimated that 70% the GDP goes to foreign debt servicing today (Lohani, 2004). At present approximately 3 billion dollars stand as outstanding loan of the country with 100 dollars of foreign debts on each citizen

and Nepal stands as a classic case of Neoliberal policy gone wrong (SAAPE, 2003:128).

Globalization, privatization and Maoist insurgency

It could be said with reasonable certainty that Nepal did not lack good policies, it lacked the political will to implement it. Development critics pointed out that good ideas and practical programs were not taken seriously by the government, making one suspect “if they were meant to be seriously taken at all” (Panday, 2000:77). This suspicion is well founded given the fact that in 1985, the heydays of Basic Minimum Need initiative Nepal had approached the International Monetary Fund (IMF) for assistance. As a token of its willingness to go with terms of such assistance, Nepal attempted to transfer ownership of 12 public enterprises to private ownership (Dahal, 1998:55). Nepal received Structural Adjustment Program (SAP) Fund from the World Bank in 1987 and 1989 (Haq 2001:89). It was a time when debt crisis all over the world was forcing the poor countries to seek SAP loan from World Bank for their debt servicing. And in return, bring certain “adjustment” in the economic structure of the country such as Privatization of public services and enterprises, Liberalization of Trade policies, Increased emphasis for the production of food and goods for export rather than domestic consumption among others (Werner et al. 1996).

The Panchayat government had sought to meet the fundamental economic and health needs of the people by opening up to privatization effort of globally engineered SAP program. It was true that many of the State Owned Enterprise (SOE) were draining on the scarce resources of the nation. This was mainly due to the mismanagement, inefficiency, corruption, and more fundamentally, its control by ruling classes that specialized in exploiting the people rather than serving them. So instead of making the state more accountable to people and increasing control of people over it, the way out of such sorry state of affairs was sought in privatization. However, Nepal’s attempted privatization in the mid-eighties were mired in controversy and confusion and the real effort toward privatization made its head-

way only when the first elected government of post-1990 Nepal privatized three SOEs in 1992 (Adhikari and Adhikari, 2000:26-27). The thirteen years thereafter, Nepali economy has been a testing ground of neo-liberal policies. Political parties, who came in power in post Panchayat Nepal, succeeded only in blocking the transformation of feudal relation in land, and importing wholesale the global capitalism's agenda of privatization.

This marriage of old feudal interest and modern capital's interest exacerbated the bristling contradictions of Nepali society trapped in poverty. Some political scientists and economists have argued that the explosion of political conflict and violence, including Maoist insurgency, are but an expression of negative impact of globalization policies:

“The process of globalization has led to negative impacts on various sectors of political economy, labor market foreign investment and industrial sector..... The adjustment period indicated significant devaluation of Nepalese economic about one fourth of its value vis-a- vis the US dollar and a corresponding shrinkage of its access to capital. The Price for public goods and services in items such as drinking water, milk and dairy products, sugar, electricity, petroleum products and transportation more than doubled without corresponding increase in income and wage of the people. Privatization drive has led to the exploitation of Nepalese people (consumer, voter, women, poor and workers) and the environment. The lever of globalization have failed to break the monopolistic control of Industrial magnates on the supply of many essential goods and services. They have also ignored social economy, social justice and equity. Globalization process thus has widened the rich poor disparity in Nepalese society.....During adjustment period, the poor, the women, the workers and marginalized section of society suffered due to various problems like weak agricultural performance, population growth, deteriorating health, inflation, reduced subsidies and so on. There are the important factors that have caused political turmoil in Nepal- especially the Maoist insurgency; it deprived people of even their right to access to

their own resources, which has led to the atomisation of family, neighbourhood and society.” (Dahal 1998).

Peace is possible

Gro Harlem Brundtland warned in 1999 that “Violence is a neglected epidemic” as it is “fast overtaking infectious disease as the principal cause of morbidity and premature mortality world wide” (Brundtland quoted in Nanthikesan, 1999:45). Nepal appears to be the prime example where violence is already an epidemic. An article in Guardian warns that “Asia’s deadliest conflict has not been in Afghanistan, North Korea, Kashmir or Indonesia. Instead, Asia’s most lethal war has been waged largely unnoticed in the mountainous Hindu Kingdom of Nepal” (Norris, 2004). Peace seems to be the only way to protect people’s health from such epidemic of violence.

It would be interesting to note that so much of violence associated with present conflict in Nepal could be ended if election of “Constituent Assembly” be held in the country to draft a new “Constitution”. Maoists had conceded to back off from their earlier demand of republic and became ready to compromise if Constituent assembly elections were granted where people could decide and vote for the new constitution they wanted for governing the nation. A seven-month effort of peace talk was broken on August 2003 when it was clear that the government would not concede to the demand of Constituent assembly and new Constitution.

Incidentally, the demand of constituent assembly is associated with the first revolution of 1951 in Nepal, which was never fulfilled. Following the constitutional demand of India struggling for independence, Nepal also sought political change through constituent assembly. So for half a century it has remained as history’s due. Only recently Maoists have made a claim on it, but as other political parties have made claim on Republic slogan, there seems to be no hindrance to accept the demand of constituent assembly also. Therefore, while Nepal is no doubt trapped in a vicious war, the way out is still possible by adopting the most democratic option of Constituent assembly, which may make the People genuinely sovereign.

Such hopes stand against the government's recent initiatives to form vigilante "Volunteer Security and Peace Committees" to combat Maoist rebels. These peace committees are a "cruel irony because government plans to provide weapons to untrained and unaccountable village defense forces" and "experience around the globe has shown that armed vigilante groups generally prove a disaster. Militias only usually intensify conflict, and their heavy-handed disregard for the rule of law often serves as a de facto recruiting drive for the very same guerrillas they are trying to defeat." (Norris, 2004). As the wishes of the King to consolidate active monarchy in the name of "constructive monarchy" has fueled massive agitation for a Republican Nepal, such militarist approach of the government to peace may only invite more violent response not only from the Maoists but the agitating political parties as well. Therefore when there is still time the exploration of peaceful solution of constituent assembly appears to be the only way out of this impasse, before even this option loses its rationale in the mire of violent armed conflict in Nepal.

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RE-EXAMINING NATIONAL SECURITY

Kamal Mitra Chenoy

National security is now seen as the primary concern of the modern state and is the basis of its foreign policy and international relations. The paramount task of the state is perceived as creating and maintaining political, economic, social and other structures to ensure the security of the state and country. The notion of state security is linked to its strategic vision which in turn is shaped by its core concepts of national security. Realist and neo-realist theories provide the dominant, mainstream theoretical foundation of the prevailing concepts of national security and international relations, and the practice of foreign policy based on these. For these theorists, security is the essence that ensures the survival of the so-called nation-state. National security based on military and state power is seen as the core of security in times of conflict or potential strife.

Realists argue that since states are the primary providers of security, an individual secures her security by virtue of membership of the national community. The individual's security is bound to the state because the latter's role is to protect and preserve the social order, and to protect individuals from foreigners and from internal strife.¹ From this perspective individuals are not the appropriate starting point in thinking about security. Realism adapted the political theory of the late medieval English social contract theorist Thomas Hobbes who theorized the dominance of man in an anarchic state of nature. Based on this, realists believe that international politics is a realm of anarchic interaction between sovereign states based on selfish national interest, in which the national interest of each state is, at one stage or another, divergent and contradictory. States operate in a world where their security and autonomy are constantly threatened by other states. This anarchy leads to a generic relation between states based on a 'balance of power.' Neo-realists developed on the classical realist theory, and adapted the con-

cept of anarchy and the lack of formal governance as the main principle of the international system. Whereas realists did not accept the notion of interdependence, neo-realists like Kenneth Waltz argued that while there are no automatic mechanisms to accommodate clashing national interests, balances do form in which the freedom of choice of any one state is constrained by the actions of all others.²

Realism and neo-realism, as shown above, are deeply rooted in the European historical experience and its political thought. This intellectual tradition is drawn from the conception of the state as an actor that is built from the abstraction of the 'sovereign man', the hero and warrior in political theory especially from the Italian medieval theorist Machiavelli to Hobbes. Hans Morgenthau, the founder of realist thought, takes from Hobbes and posits that the 'nature of man' is the starting point for theorizing on International Relations (IR). Power is seen in terms of a hierarchy dominated by men who can influence others, when necessary by force, so naturally the state, a conglomeration of males, also seeks domination and society is also organized on this basis. The neo-realists developed on this and their main actor was the man of rational choice, a construct common to the then current neo-classical economic theories and methodological individualism dominant in social and political theory. These foundational theories of IR written well before the existence of democracy and feminism have excluded women from the political stage, as has the practice of IR. Initially used by the West, the neo-realist doctrines of national security, are the theoretical foundations on which Southern states have increasingly based their own theories of security.

In this framework, patriarchy is a crucial aspect of the social order sustaining the state. As it is believed that national security would be threatened if the prevailing definitions of man as the political actor were challenged, it thus becomes contingent to exclude women.³ IR theory is deeply masculinist because based on traditional, pre-democratic political theory the state is theorized on the basis of patriarchal relations, and women are seen as the 'other' or the 'outsider'. The neo-realists like Waltz adapt

from the social contract theorists and virtually ignore women in their construction of the nation-state.⁴ While the realists and neo-realists imbued the state with rationality and capabilities, women, as a separate gender were kept outside the public sphere of rationality and the realm of international politics.

Though patriarchal customs preceded state formation, the state played a critical role in structuring patriarchy in all its institutions. The construction of gender, the process of consent making (ideological structures), and the coercive powers of the state have legitimized class relations. In this intellectual tradition, patriarchy, power, security apparatuses and militarism are intertwined. Women's role in the domestic sphere and their relegation to secondary status in state and society has been legitimized by state policies as reflected in legal rights and economic, social and political positions in societal and state structures.⁵ The state has been the main organizer of gender relations, and continues to legitimize its patriarchal base by constructing the masculinist ideology that discriminates between public and private life.⁶

The state further formalized gender power relations by retaining male domination in the top personnel of states. Gender differentiation is evident in the presence of a disproportionate number of men in the coercive apparatus of the state (army, police, etc.) with women concentrated in the service sectors, (teachers, health, clerical support, etc.), on the pretext of protecting women from the 'tough professions.' It is because of the long history of patriarchy and exploitation and its legitimization by the state structures, that the entwining of patriarchy and political system, which is the basis of a militarist notion of national security, became so acceptable and appears apolitical and natural.

Through history, the very construction of the concept of the 'masculine' has been linked with the notion of power. This does not mean that all men think in patriarchal stereotypes, but that concepts and institutions reflect historically and culturally conditioned ideas about knowing the world that are identified with a markedly masculine experience.⁷ Our task is to disengage the concept of national security from its statist, militarist and

patriarchal roots and present an alternative people-centred, feminist and peace loving concept of national security.

The neo-realist paradigm does not merely describe the world but serves to justify and perpetuate the social and political order that it describes. Alternative paradigms of international politics and national security expose the way in which ideas about militarism, patriarchy and the nation-state are constructed and used to legitimate inequalities. Moreover, in the historical development of international political theory the language that it employs: of power, virility and masculinity reflect militarist and patriarchal concepts of power and domination.⁸ In India, images of manhood, war and power were interlinked and invoked by chauvinist forces when India and Pakistan carried out nuclear tests in May 1998. Statements from the Hindu right that followed the nuclear tests called the tests a symbol of “Hindu revivalism”. There were proposals for instituting religious symbols (“Shakti Peeth”) at the Pokhran site. The Vishva Hindu Parishad (VHP) promised to distribute the radioactive ‘holy sand’ from Pokhran to distant corners of India. All previous governments that had abjured from the tests were described “as a bunch of eunuchs.”⁹ According to Bal Thackeray of the Shiv Sena the nuclear tests were a testimony to the ‘manhood’ of the state as: “We have to prove we are not eunuchs”. There were many such echoes of “national pride” at various levels of civil society.¹⁰

Such a discourse has multiple purposes. National security is privileged and is identified with a particular religion and more specifically with the male in the religion. The state is shown to be virile and ‘masculine’ only when it has more than adequate force and nuclear capacity. Without this nuclear capacity it is seen as emasculated and categorised as a ‘eunuch’. The ‘enemy’ state is asked to ‘wear bangles’ because it is not capable of a response since it is relegated to the lower rank of female.

What distinguishes the feminist critique of realist and neo-realist national security doctrines is its engendering of power and security concepts.¹¹ Other critics like Justin Rosenberg argue that realism is flawed because the theory of anarchy as a deter-

minant in IR is fixed in specific periods and cannot explain historical transition and change. International relations are not just about inter-state conflict, but domestic conflicts can be internationalized and international conflicts can be a major aspect of domestic issues, as the instances of Russia in 1917, China in 1949, the Soviet Union and Eastern Europe in 1989-1991 showed.¹² Though realism claims to focus on stability and order, it does not relate to internal conflict or its reasons.

Feminist and other alternatives to realism/neo-realism find common ground with democratic groups involved with empowering marginalized people who also criticize dominant IR theories as profoundly elitist doctrines restricting themselves to actors of state power and privileging the interests of the state over human and popular concerns. Feminist theorists have broadened the study of IR by encompassing emancipation, equality, identity, and empowerment into its debates. Since realism/neo-realism do not address internal issues, these do not concern itself with matters of social justice, equity, freedom or empowerment that are the real issues causing conflict both between and within states. In conflict resolution and IR if these issues are not addressed adequately, they are bound to create new conflicts and deepen existing ones.

Countering Militarism

Militarism is the ideology that values force as a means of security for resolving conflict and in doing this legitimizes state violence. National security doctrines rely on militarism and justify it in the name of national interest which is shown as the “supreme interest” of the nation. In instances when the civilian leadership increasingly uses military power in civil use “to save the nation” and to solve political problems by citing instances of instability or sectarian strife, this process legitimizes authoritarianism and militarizes society. Even those states that have achieved independence without violence sustain themselves through nationalism. An important task of national security doctrines is to reinforce the legitimacy of state violence for the sake of ensuring the preservation of national security.

The militarist idea of a nation is one based on hyper nationalism and one that is welded together in adversity rather than peace – “With us or against us”, “die for your country”, “stand up for your nation” are characteristic expressions of notions of power that are expressed through militarism. This notion of power advocates a hierarchy in social relations, where women have a specific role as a subordinate support system for men. As patriarchy and militarism intersect, the use of force for conflict resolution is legitimized and there is a simultaneous privileging of ‘physical prowess,’ or masculinist force. In this way male privilege becomes the common denominator in inter-state, national and private politics. Clearly, while it is possible to draw connections between militarism and masculinity, they are not identical and should not be conflated, but have “become entwined”.¹³

Militarization involves cultural as well as institutional, ideological and economic transformations.¹⁴ Political systems make decisions that keep patriarchy and militarism alive through active political decisions of the state rather than by tradition or culture.¹⁵ Militarization exists during peace and war and can occur in any part of society, that may or may not be controlled by the military, thus virtually anything can be militarized -- toys, scientific research, motherhood and curriculum.¹⁶ A state does not have to be dominated by the military to be militarist. Democratic states often use militarist methods to deal with other states in their foreign policy or with opposition and internal dissent. Militarism, as we have seen, rests on the theory of realism and neo-realism.

Militarization occurs when any part of society becomes dependant on military or militarist values. In India, Kashmir and North East Indian states are more under military control than the rest of the country. Non-state movements that oppose regimes or state systems can be as militarized, (e.g. the LTTE in Sri Lanka, the Lashkar-e-Toiba in Kashmir, the ULFA in Assam, all use force and terrorism as their doctrine). Political groups, especially fundamentalist groups can advocate policies of militarism within civil society and can have militarist organizations and

outlook. (For instance the Shiv Sena, in India, the Jamaat-i-Islami in Pakistan, the LTTE in Sri Lanka, the Taliban in Afghanistan, are all organized on militarist principles, give their cadre military training and advocate the use of militarist methods to deal with the 'enemy other').

Entwining Nationalism, Militarism and Patriarchy

Most nation-states of the world have been created through the ideology of nationalism and their boundaries have been defined after conflicts.¹⁷ Nations need nationalism and homogenous entities. To construct these they create the "other" who is opposed to "us" in the nation. This other is the enemy, the outsider, against whom the nation must struggle. Values and emotions of nationalism that characterize the 'modern period' also sustain the twin values of militarism and patriarchy. Many modern states in Europe and the postcolonial states of Asia and Africa, were linked with the rise of nationalism. Nationalism played a progressive role in history linked with the process of modernization, anti-colonialism and secularization. But since patriarchy and militarism were part of nationalism during these formative periods they have been retained in the ideological and institutional structures of the state. At the same time, women also identify with the nation and are not excluded from it as other groups of different ethnicity, race or color may be. A potent method of justifying nation-states and their coercive militarist and patriarchal role is the ideology of nationalism

Neo-realism assumes that the nation-state is the primary source of identity and allegiance for individuals. National security issues generate a sense of shared political purpose under the impact of nationalism that is further heightened during times of war. National security perceptions and nationalism are used as the currency of political power by most political parties. Military budgets are thus high priority items in almost all regimes, regardless of the ruling party. Right-wing political parties based on national chauvinism construct a false form of national security threat to mobilize support and generate a mass consciousness that will help build a homogenized community of citizens,

that perceives itself against an identified 'other' community, domestic or foreign that is characterised as an enemy.

For example, in India, ultra-nationalists like the Shiv Sena, RSS and others see the Muslims and the Christians as the 'other,' threats to the 'Hindutva nation'. They question the loyalty of Muslims in India and link them to Pakistan. The minority communities are viewed as 'outsiders' and unpatriotic and are constantly called upon to prove their patriotism. This connection is sharpened during conflict. For example, during India's Kargil war, minority communities were under pressure to support the war effort and display their patriotism, which was given prominent place in the press. The nationalism of Muslims became contingent on their hatred for Pakistan. Patriotism of the minorities is continuously tested, whether it is during cricket matches, or during war.

This communal construction serves to construct a contiguous internal and external enemy that is presented as a threat to the entire homogenous construction of the nation. Social, ethnic, gender and other differences are papered over through a dominant nationalism. Since everyone has a fixed place in a nationalist hierarchy (man, woman, native, foreigner, class, and caste), this legitimizes the state system in which violence is used as the ultimate arbiter of social conflicts. This process also attempts to curb the autonomy of women.¹⁸ National chauvinism privileges or glorifies the positive characteristics of the dominant culture and poses it against the alleged inferior /inimical characteristics of other nationalisms. National chauvinists are thus prepared to use violence against the "other" communities. Historically, the construction of nationalism has promoted the image of male domination and male leadership. The distinctions between nationalism and militarism are blurred.

The danger of nationalism comes when sectarian forces twist it for xenophobic purposes. The slide from nationalism/patriotism to chauvinism/jingoism is easy and is often undetected. Many excuse national chauvinism as part of nationalism. In instances of xenophobic nationalism, an attempt is made to construct an enemy 'other' as a threat, since the 'other' groups are seen as

disintegrative to internal unity and to territorial integrity or any other attribute of sovereignty. When realism/neo-realism ground themselves on ethnic homogeneity and nationalism, these are on a razor's edge because nationalism can pander to chauvinist forces who in turn use the paradigms of realism and neo-realism for legitimacy.

All South Asian states have the phenomenon of aggressive and insecure nationalism. The ideologies of nationalism support a conception of womanhood that links women primarily with the family and the home (reproduction). Their role is seen as nurturer, and sacrificing supporter for those (mostly males) who are decision-makers, executors, protectors or producers. This role is similar in 'normal' periods or during conflicts.¹⁹ The example from recent Indian history shows this clearly. The sacrifice and martyrdom of the Hindu male was the subtext of the entire Kargil saga. These identity, gender differences and power equations provided legitimacy for further militarization in the minds of the people. National security privileged 'at any cost', rested in the hands of a 'macho state' that provided 'protection', with the traditional task of the 'male', the patriarch in the family.

It is through the messages of nationalism that civil society can be militarized. Women are an important agency in militarizing civil society. Women carry this message through the message of a militant nationalism. The nation itself is symbolized as a woman for example—Bharat Mata or Mother India. This symbolism evokes the most fundamental of imageries. It is in this context that the forces that use militant nationalisms in India, use the patriotic song "Vande Mataram" (Hail Mother). In this, women's bodies symbolize national territory to be protected and to be possessed. Just as the 'other' or enemy territory (symbolized also by the woman-mother image body) has to be violated and dispossessed.

Militarism has many sources. The most essential site for militarism is the state, which sustains its legitimacy through a balance between consent and coercion. Force and militarism are legitimized by the state itself. The state opts for military methods to

deal with foreign policy issues. So, Pakistan supports Jihad and militancy in Kashmir, India does not want to talk to Pakistan until Pakistan stops this support or India exterminates the militancy through its own counter insurgency methods. In both cases there is a militarist policy. States spend huge amounts on defense expenditure at the cost of social expenditure. Public policy advocates militarist traditions and symbolism. For instance, much after the Kargil episode, there has been an attempt to keep it alive and reconstruct it. Besides the annual celebration of Kargil 'victory', roads and schools have been re-named after Kargil and its martyrs. In just one state in India, Himachal Pradesh, the state government formed a special panel of 3 ministers who renamed 67 educational institutions, including a degree college, 13 senior secondary schools and 16 middle schools after those killed in the Kargil crisis. Besides this over 50 link roads across the state were given names associated with Kargil.²⁰ This shows militarism is part of concerted state policy. Long after the military episode is over, the state is interested in associating nationalism with militarism. This is necessary for the state to legitimize militarist methods, justify military expenditure and keep the military machine going.

Towards a Pro-People, Feminist and Peace Loving Concept of National Security

The dominant realist and neo-realist paradigms of international politics which also inform mainstream theories of nationalism obviously have to be replaced. I have tried to indicate the framework of a pro-people, feminist and peace loving alternative above. Not only do alternative theories of IR, nationalism and national security have to be engendered, these also have to be de-statised and democratized.²¹ The focus of national security should not only be 'human security' as some scholars have argued, but must also privilege the subaltern sectors of civil society. This would also necessitate a democratization of policy making and the expansion and protection of human rights. International law in general, apart from international humanitarian and human rights law in particular, should systematically outlaw war, WMDs [including possession by nuclear weapon states], and the use of force in international relations, except in

exceptional cases strictly regulated and monitored by international agencies like the UN, International Court of Justice, etc.

This is an old demand of the peace activists and movements. Recent events like the wars against Afghanistan and Iraq, US-backed Zionist state terrorism against Palestine, the continuation of militarist politics most recently in Haiti, and the aggressively militarist policies of the George W. Bush administration, make this requirement of alternative notions of security all the more pressing.

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(On June 22, 1933, **Jawaharlal Nehru** wrote a letter to his daughter, Indira, from which the following excerpt is taken. The letter is included in his *Glimpses of World History*.)

“...As fascism has spread in other countries, it has become clear that it is not a peculiar Italian phenomenon, but that it is something which appears when certain social and economic conditions prevail in a country. Whenever the workers become powerful and actually threaten the capitalistic State, the capitalist class naturally tries to save itself. Usually such a threat from the workers comes in times of violent economic crisis. If the owning and ruling class cannot put down the workers in the ordinary democratic way by using the police and army, then it adopts the fascist methods. This consists in creating a popular mass movement, with some slogans which appeal to the crowd, meant for the protection of the owning capitalist class. The backbone for this movement comes from the lower middle class, most of them suffering from unemployment and many of the politically backward and unorganised workers and peasants are also attracted to it by the slogans and hopes of bettering their position. Such a movement is financially helped by the big bourgeoisie who hope to profit by it and although it makes violence a creed and a daily practice, the capitalist government of the country tolerates it to a large extent because it fights the common enemy - socialist labour. As a party, and much more so if it becomes the government in a country, it destroys the workers' organisations and terrorises all opponents.”

LET DEVIDING LINES BECOME MEETING LINES

Prof. S. Tipu Sultan

In the context of India & Pakistan the dividing lines were created over five decades ago in 1947. People from all religions and non-religious groups fought together against the British Raj for several decades. But then came the two-nation theory and the continent was divided on the basis of their religions i.e. Hindus & Muslims. This dividing line did not care about the millions of Hindus & Muslims still living on both sides amicably. Even after migration of millions of people & death of millions during the migration across the line the two nations have not settled. It is not only here similar lines of divide were also created in other parts of the globe on one or other pretext. The division of Korea into North Korea & South Korea; Germany into East Germany & West Germany by the Berlin wall and the divide between Israel & Palestine.

The dividing line between India & Pakistan was made a sort of non-crossable & unfriendly. To keep it like that a source of conflict was created & maintained as Kashmir conflict. This suited the extremist and the vested interest groups on either side. More than five decades have passed but the “Pot is still kept boiling”. The issue (conflict) has been kept alive as a policy matter along with very restricted movement across the border and with very limited trade relations between the two countries. To achieve these objectives four full-scale wars have been imposed & fought between India and Pakistan at the cost of health, education & development. These wars and the ‘hot status’ at the line of divide suited several politicians, the bureaucratic structure and the army setup. But it has made the life for millions & billions of people of both sides more miserable; has pushed majority of them below poverty line each passing year, month & day.

This so called conflict and the interest of vested interest groups had triggered a nuclear war only few hours away at one time. More than a million well-equipped army of both sides faced each other on the line of divide, stretching hundreds of miles for almost a year. The economic cost was heavy for which population at large on both sides had to cough out resources.

As a result of this situation stretching over five decades now, the loss in trade and adverse impact on growth and development of both the countries are difficult to calculate. The amount of human misery and the plight of divided families are incalculable. Four full-fledged wars, lasting a few days each time, minor border conflicts & shelling on innocent citizens have led to loss of lives of innumerable innocent people in the last five decades. So has been the loss of property & resources. These have been uncalled for and shameful.

Enough is enough. It is time sanity must prevail. The ground realities seem to “sink in” on the decision makers. The people of this south Asian region who have similar culture and language cannot be separated. This so called dividing line between India & Pakistan and SAARC countries should be opened if not abolished. Free movement of citizens and trade activity should be established as early as possible. The common man by and large will be the beneficiary. Respective countries will flourish at the end of the day. All the issues of conflict especially the core issue of Kashmir can be sorted out through negotiations. I believe there are 17 proposed solutions to the Kashmir issue, which need to be discussed & resolved. After all countries of Europe who fought World wars & almost destroyed each other, have sorted out all problems by negotiations. The ugly Berlin wall between East & West Germany has disappeared. Their territorial integrity is intact but there is no line of divide. Why can't we achieve it too between India & Pakistan and SAARC countries?

This line should not only be a meeting line but a cross over line to love & respect each other. This line is artificial & man-made. The population must be given a chance to grow. Prime Minister

Atal Behari Vajpayee and President Musharaf have a life time chance to change the destiny of their people. They can change the face of the earth on this part of the World. They must resolve all issues & earn their name in history. Here is a chance for the present Governments of both sides to earn a Nobel Prize. I appeal to General Musharaf, and Prime Minister Vajpayee – ‘please move forward, grab the opportunity. This line of divide between hearts & minds must go. People have a right for it’.



Original poem in Hindi by Vinay Mahajan. English translation by Kamla Bhasin.
Illustration by Rajasthan Kisan Sanghatana.

Courtesy : Voices of Sanity

WOMEN, WARS AND ARMED CONFLICTS

Ms Amarjeet Kaur

Militarism and Militarisation have been associated with patriarchy by the women organisations in general, as because these advance and perpetuate a culture and ideology of war and civil strife. Militarisation has fixed ideas on class, caste, authority and gender issues and extends the power of the state in the civil society. The masculine nature of military values could be gauged from the concept of training the boys as it goes with the ideas “to bring out the men” and “to be men” in them. The message carried is “to kill the women in you.”

The militarisation as cautious effort of the state is carried on more vigorously when the authorities fail to deliver on the basic demands of livelihood and basic essentials of survival of the people at large. This is very much evident from the ongoing process not only in South Asia but in the world as such. Militarisation is used as a process for transformation of the society on all fronts, cultural, economic, social, ideological and political etc. The impact of militarism on society takes many forms and the whole system and the political arrangements are caught in the traps in various ways: Science and technology are directed to research and production of new weapons, communication systems and delivery devices; Business industry and labour depend on military contracts; National budgets disproportionately fund military activities and the social needs are neglected. The budgets in India and other South Asian countries have risen considerably in the last few years and similarly this phenomenon is on rise in several other countries. The military expenditure in developing countries increased four fold since 1960 and accounts for 20 percent of total world expenditure on defence. This does not include the spending made in counter-insurgency programmes, debt repayment and service charges on loans for defence purpose.

Only one nation we know which lowered its budget in 1998 was Cuba. As per Human Development Report 1998 World Military spending equals the income of nearly half of the world's people. The poor countries spend greater proportion of their national product on arms than rich countries. The resources get wasted on vast scale. The environment is degraded during the war and conflict situation. The media plays a role in creating a picture of the 'enemy' legitimising military action. The tunes sung and images painted stoke the fires of national patriotism against rival nation. This phenomenon is repeated time and again whenever the regimes desire justification of their political decision for militarisations. In order to secure vital economic interests there is increasing trend for wars, embargoes and internal conflicts to be directed against civil populations and social infrastructures including health and education. The impact could be seen on the manufactures of toys for children and the school curriculum for impressionable minds to promote militarism as ideology.

The people in general want peace. The current statistics shows that more than 75 percent of war casualties are civilians specially women and children. Modern weapon are indiscriminate to hurt the largest numbers.

Historically speaking the women's movement in the world emerged as a peace movement. They demanded peace as because they are directly and specially impacted by the ideology of militarism, the whole process of militarisation of society in all its aspects and then in situations of war and civil strife. They are humiliated, assaulted, raped, murdered during conflicts which are not of their making. They suffer as wives of killed and injured soldiers and as civilians. They are in anguish and pain in managing life as mothers of the hurt and wounded children. It has been seen in many parts of the world as much in South Asian region that the damage and destruction takes place comparable to a full scale war in situations of communal, regional, ethnic and other sectarian divides. The women become victims caught between the state and the extremists, terrorists or the opposing communities in the feud. They increasingly become victims of domestic violence at their homes as an impact of the situations they face in these conflicts.

It is a well researched fact that the sexual violence against women has been perpetrated on women in wars as instrument of coercion against the enemy. This has been used as an instrument of coercion and humiliation in the communal riots, inter community as well as ethnic sectarian conflicts. This has been proved beyond doubt that there is relationship between conflict and violation of women's body. It was witnessed in partition of India in 1947 in both sides of the border, also when the fleeing Pakistan army raped Bangali women in 1971, or what the women in some Latin American countries faced or the women who suffered a similar fate in Mozambique and South Africa, the humiliation and assaults on women under apartheid or during the conflicts in former Yugoslavia. This happened also in Afghanistan, Srilanka, Guatemala, Rwanda and Burundi among others. More than 20,000 women in former Yugoslavia and 60,000 women in Rwanda alone met this fate according to reports. It is a widely known fact now that the women were used as comfort women in Korea and in Vietnam by the men of the imperialist armies. The women pushed into prostitution as consequence of US war on Vietnam was a big problem which that society had been grappling for salvation.

The patriarchal construction of a woman's body as symbolising the 'territory' or 'property' of the enemy which has to be violated is the belief that leads to mass rape as part of genocide, humiliation and destruction of the enemy. The perpetrators of sexual violence include military, state security forces, armed perpetrators of inter-community sectarian and ethnic conflicts.

Women who survive rape are acutely aware of being stripped of their assets and their worth. Ntewasse Gavunro recounts the story of her rape in wartime Mozambique: *"The soldiers liked to punish us. They would select girls aged 12 to 14 and ask them to take off their clothes and then rape them while all of us stood watching. Oftentimes we turned our faces away and they spanked us or spat and made us look at gunpoint. On another occasion they made a 16 year old boy rape his own sister and their mother was also being raped at the same time. Sometimes we were raped by 10 men. I felt I wanted to die because I felt I wasn't worth anything any more."* (quoted in Franco 1999)

Guezane Djanne, a maimed Mozambican woman, said. *"I am amputated in both arms because when they attacked our village the rebels killed my husband and uncle and wanted me to drink their blood which I refused, they raped me and took a very heavy stick, made me lay down and pounded my arms on the floor. ...during the war rape was always the motto of the soldiers."* (quoted in Franco 1999)

The motive behind rape in all these cases have been to terrorise the population and to inflict maximum humiliation on communities. As Liz Kelly noted in her book *"It is the women who carried the shame and were later shunned by and excluded from society - they embodied the failure of militarized men to protect their homeland."*

Mary Robinson, UN Human Rights High Commissioner while speaking in an international seminar on the related subject remarked: *"In fact, official failure to condemn or punish rape has given it overt political sanction and allowed for rape or other forms of sexual torture and ill-treatment to become tools of military strategy."*

Another aspect is of women and children being the largest number of the refugees due to war and conflicts. According to UN High Commission of Refugees, 70 to 80 percent of world's refugee are women and children. Women play central economic role as sole care taker of children and of the extended family. They nurtur traumatised children and families to bring them to normal life. They face tough time due to food scarcity, destruction of infrastructure and basic facilities like water, roads, bridges, shelters, hospitals and farmlands etc.

[Reports from Refugee Camps from Mozambic, South Africa, Bosnia, Kosevo and Palestine camps near Israel are testimony.]

There have been enough studies to show that the women and girls suffered in refugee camps and are continually at risk of molestation and rape from male camp guards and inmates. A Mozambican woman interviewed in a South African refuge camp said: *"They (Renamo) were killing our people - we were seeing them. They were coming to us as husbands. Can you afford to face such a thing? At the camp I was chosen to be the*

'wife' of the commander. And other together with my children were given as 'wives' to other soldiers. We feel it because the Renamo were showing us guns that if we don't do these things - sleep with them and cook for them - they will kill us. We did these things. So that was a terrible thing to happen to us. What has happened to us - our properties have been damaged, our bodies have been damaged. Everything - our life has absolutely changed because of Ranamo. The spirit has been damaged." (quoted in Sideris 1999)

The women pass through an agonising search for missing friends and family, many suffer from post traumatic stress disorders and only a few receive treatment for it. The women are mainly responsible not only for themselves but for rearing, controlling and educating children in over crowded refugee camps. It is no less than a nightmarish. Female body processes - menstruation, gestation, lactation etc. become burdensome and uncomfortable. Many girls disappear into prostitution. In the post war period to look for alternative of livelihood is great problem. The lack of access to land, credit or capital pushes these women into more poverty. Those who are made to shift to distant areas because of security reasons face language problems and constraints of getting livelihood.

In situations of food scarcity and lack of other basic amenities, it is woman who bears major brunt as she is the one who reduces her intake first of all. Then environment degradation also impinges women maximum. She has to search for alternatives of livelihood when farmlands are destroyed. The studies from El-Salvadore bring this fact to the fore. The impact of Gulf war in 1996 and the economic sanctions imposed on Iraq brought about deaths of several thousands of children and women due to polluted water and lack of medical facilities.

There is very much a relationship between organised, structural violence and domestic violence. The studies from war zones of Bosnia and Rwanda showed escalation of domestic violence during war.

The violence against women does not begin or end with war, it is in continuum. The domestic violence against women accord-

ing to recent studies reflect that 50 percent women worldwide suffer from this, in some countries the figure goes upto 80 percent. Women's own battle against violence is also a battle against militarism.

Nationalism and Patriotism though played its role in history for national liberation but it did homogenised the people in a fixed hierarchy. When the distinction between nationalism and militarism is blurred and the national identity is equated with specific race, gender and religion it is logical that women bear the burden of being mother of the nation.

The country is made co-terminus with mother and this appears to be raising her social and political status but actually it has been seen as lowering her status. Rajput women in India used to handover swords to men going to war, and used to commit Sati on their death. The men if refused to go to battle were told to wear "bangles" as sign of weakness and cowardice.

Men as the fighting personnel in various forms, such as being part of national militaries, popular militant political police forces and armed gangs of warlords have been taking part in violence for honour, patriotism or brotherhood, in self defence, for liberation, to liberate others and for money etc. In various cultures the prevalent notions are that to be a real man is to be ready to fight and ultimately to kill and die. The political leaders tell them to fight for safety of their women and children. In the studies made by Urvashi Butalia in regard to violence during partition of India in 1947 she quoted from interviews she had with Sikhmen who took pride in talking that they martyred their own women folk to save them from being captured by muslims and forced into Islam.

The women were used to encourage their men to go to wars and then end with their death. But in modern age women become part and parcel of the liberation movements taking arms in their hands. Their participation combined with aspiration and struggles for gender parity in new societies also need to be recognised as sign of their growing sense of empowerment. Several studies from Latin America, Africa and Asia have brought women speaking of their dreams while recognising the gender

discrimination as deep rooted in all situations for them.

The examples of women in North Ireland, from the border of Israel - Palestine of 'Intefada' provided a content for many women not only to learn more about themselves but also to come in contact with other women. The confidence and legitimacy of participation in political movements emboldened them to debate for themselves. The lives and identities changed and they emerged as role models for other women.

The studies from El Salvador revealed that the women fighters had to re-concile the contradictions at heart of their war experiences. They became guerillas and collaborated in destructing lives, but yet they continued to fulfil their maternity roles. Their camouflaging skill in dodging the enemy in war time was encouraged where as in peace time this was considered to be bad behaviour which needed censure.

In South Asian region, we would peep into the background little to understand how the issue of violence, poverty, peace and development is so vital to women in this sub - continent.

Bangla Desh came into being as an independent nation after a prolonged struggle for liberation against a well trained and fully equipped military. Women played significant role in this struggle. Pakistan Army committed genocide in March 1971 killing 1.2 million defenceless children, women and men. Rape was used as a strategy to humiliate and control an oppressed community. The International Court of Justice had charged the Pakistan Army with continuous rape, raping to death, murder after rape, almost entire generation of Bengali women passed through the trauma. The Court also brought to the focus the instances of enforced prostitution and forced sterilisation. When the history got compiled in Bangladesh, in the accounts of war, the atrocities on women did not find much place neither the role they played in the freedom movement could get proper place as very few testimonies of women were contained in the 14 volume history. Ameena Mohsin in her study shows that those raped and had children as consequence did not get much help from the political leadership except being termed as

“Birangana” and “war heroines”. Women were rejected by their families in most of the cases. Men heroes on the contrary had many gains in rehabilitation processes. Women not only had little help but soon they were relegated to traditional behaviour and customs like purdah, premium on chastity, segregation of women, norms of female subordination of women and so on.

The military coup which overthrew the govt. of Sheikh Mujib in 1975, then the respective coup and several changes in Bangladesh polity has not given any succour to women rather it meant more miseries. The military budget from about 13 percent in 1975-76 is today more than 30 percent whereas female literacy remains 24.4 percent and less enrolment for girl child in schools and there is one doctor per 12,500 persons. The combination of militarism, Islamic nationalism and authoritarian politics has reinforced gender stereotypes further curbing the freedom of Bangladeshi women. The civil – military powers nexus based pre-dominantly on patriarchal values has ensured the perpetuation of male privilege in every sphere. In some villages mullah's ordered for burning of schools by NGO's. They issued fatwas to the effect that women who work outside their homes be abducted and ostracised. One study showed that there were 1500 cases reported between January to March in 1994. The Mullah's use their own version of Islamic life and women who practise birth control or aspire economic independence could be assaulted at their instance. In another study recently it was revealed that 60 percent of Bangladeshi women are assaulted by their husbands. The issue of women's autonomy receives major challenge from fundamentalist forces.

The ideology of patriarchy, militarism and fundamentalism legitimises oppression on women.

Let us turn to Sri Lanka which is typical example of becoming increasingly militarized in its attempt to contain secessionist movement. In the inter ethnic differences that culminated in race riots in 1958, due to pro-sinhala position taken by the successive governments and unable to safeguard the rights of minorities has ultimately brought a deep divide in the communities on ethnic lines. This is further perpetuated due to socio-economic inequalities between the majority and minority com-

munities. The riots in 1983 further deepened this process. Once again women bear the major brunt of the on-going violence and militarisation. The militant secessionist movement led by Prabhakaran in the initial stages prohibited his boys 'the tigers' to have girl friends. It was only after his marriage that women started getting recruited in his organisation. Tamil nationalisation too tends to be a male dominated phenomenon. Women were never given more responsible jobs. In his Tamil nationalist discourse against "Sinhala Forces", he presents romantic image of women with guns defending the nation to draw more women into the militant movement.

The human rights violations have been taking place during these long years of conflict. The human right groups have reported arbitrary detention, torture and rapes by the Sri Lanka Army. These facts came to lime light more so from 1998 onwards as there were censors on press for 15 years before that. On the other side human rights abuse in the LTTE camp of the captured security forces have also been brought to lime lights by the human right groups. Until now loss of 60,000 of human lives are reported in the conflict between security forces and LTTE.

The Government expenditure on war amounted Rs. 213 billion between 1983 to 1998. During same period the direct expenditure by both the Sri Lankan govt. and Tamil Tiger rebels has been estimated to be Rs. 295 billion according to the study by Norwegian National Peace Council. Actual value of property destroyed is Rs. 137 billion. Apart from this another Rs. 42 billion were spent on war related law and order. On the other hand side the budget allocations for health declined from 2.0 percent in GNP in 1960 to 1.4 in the 1990's, on education it dropped down from 3.8% in 1960 to 3.1 percent in 1990's.

In 1998-99 the defence budget allocation rose almost 50 percent from the previous year. The ethnic conflicts have effected all women but are being experienced differently by women in rural and urban conditions and those amongst Tamil, Sinhala and Muslim women.

The time and again the forced migrations have dislocated Tamils. The women, children and elderly were left behind to keep life

going in their homelands when the men migrated, younger men who were left behind remain under pressure to join militants. About 75,000 muslims were expelled from North Sri Lanka in 80's. For women it is hard time to maintain their cultural traditions and families. Their search for livelihoods is not safe venture. Thousands of mines maim women and children.

Small scale household occupations have gone. The production of rice and other crops itself is difficult proposition for the migrated Hindus or Muslims. Acute shortage of fuels and other essentials is common sight in these camps. It is really very hard for women.

The women recruited as combatant and terrorists have been called as "Freedom Birds" signifying their liberation. The myth of the "valiant mothers" propelled women to join the ranks of militants. Another reason for women to become combatants was increasing loss of men, the low status of women as refugees emigrants and the general political climate. The women who thought they are liberated said in interviews that they felt like men. But this liberation has come at the cost of their militarisation. LTTE women believed that militancy has expowered them but in actual practise gender hierarchy and prejudices continue among combatants.

It is reflected in one of the statement by LTTE in 1986 : "Women should dress simply, and they should not attract men by their way of dressing. Some women say that it is difficult to maintain long hair: These pretensions are wrong.... We are engaged in a struggle for national liberation. But the changes which have been taking place in our culture will only demean our society." The male leadership declares the emancipation of women necessary to the process of liberation. The sexual taboos prevalent in the out-side world are replicated by the militants despite their denunciation of those very norms.

Women have played different roles. They are transmitting the ideas of militarism either for the state or for the counter nationalism, wherever they are placed, through the story telling and keeping the enemy image alive. The state is also recruiting women and both sides are making them believe that they are sacrificing for their nation.

Statistics show that about 300,000 women have been widowed and traumatised in this ongoing civil war. Same number of children are orphaned. Widows are considered persons non grata.

The pathetic conditions in refugee camps are considered to be good opportunity for recruiting new cadres into LTTE.

Conservatism further perpetuated after reported rapes of women by Army in Jaffna as this restricted movements of women without any male escort.

The violence against women in public and private realms is rising under the shadow of increased militarism and culture of weaponry.

Now as for Pakistan is concerned it has been outrightly the most militaristic state in South Asia. It has been under direct military rule for almost half of its existence. Even when civilian and elected government assumed power, the real power was exercised by Pakistan military. The respective regimes relied on military repression and outrightly repressive law and order mechanisms to meet the internal conflict situations. The women and minorities naturally were always the victim of fundamentalist movements and agencies. The local elites and feudals continue to enjoy positions of power and the fundamentalists force the state to accede to their demands to contest the democratic and secular trends. The major consideration for the military rulers and their support base continues to be the premise that Pakistan can survive as entity by countering its main 'enemy' India.

Pakistan has remained aloof from non-aligned movement. Jihad has been popularised as on instrument of security and it impacts to both religion and sectarian aspect. The Jihadis oppose ethnic and religious pluralism. They construct the enemy 'other' religion for whose destruction they are committed. The women are made to believe into being sacred part of the mission. To quote Parveen Akhtar who lost her son in Pak occupied Kashmir says, *"when I was told about his death, I wept like my other mother. But then it is a big honour for me. I am thankful to God that I have produced a warrior who died fighting infidels"*.

Talibanisation of culture is taking place and they dictate their codes on women and other ethnic groups. The strength of their clout can be gauged from the fact that when Mushraff announced in May 2000 that he would bring modification in law against blasphemy and honour killings there was stiff opposition from Islami leaders. He withdrew his suggestion.

Pakistan's continued association with Taliban regime had severe impacts on its orientation in dealing with women.

Adultery is considered a crime against the state and distinction is made in adultery and rape. The women victims of rape don't dare to seek justice as it may be used to charge them of adultery. The forces of fundamentalist, feudalism and militarism are acting together to retain their power and in turn re-inforce patriarchy. The civilian govt. of Benazir Bhutto and Nawaz Sharif also did not dare to antagonise the military.

The position of women did not improve even in civil rule. Nawaz Sharif had banned 2000 non-government organisations many of which were working on women's rights.

The defence budget has been steadily increasing in Pakistan also. From Rs. 9.7 billion in 1977-78 to Rs. 43.00 billion in 1987-88. Besides they have been receiving generous help from US administration for the purposes of militarisation.

After nuclear tests the budget hike by Pakistan is from Rs. 133.8 billion in 1998-99 to Rs. 145 billion in 1999.

The culture of militarism is re-inforcing the concept of men's superiority. Physical abuse and rape are common within home and outside, the women of low income being more susceptible. The gang rapes are also being reported by various studies.

The growth of militarisation and fundamentalism has legitimised the increased violence of the state and society.

Military control over civilian sectors has increased. Men's conditioning in the military with colonial customs of hierarchy, honour and militarist values and traditions definitely leads to its own consequences. Added to that the growing influence of fundamentalist ideology perpetuates environment against women.

Pakistan country paper in UNFPA conference mentioned that 80 percent of their women are beaten at home.

Let us look into the changing scenario in India. The independence in 1947 came along with Partition with exchange of population on the basis of religion never seen before in the human history and a communal holocaust which left almost one million dead and several millions destitute. Hundreds of thousands of women suffered dislocation, communal violence and death. Maiming and sexual abuse on both sides of border as well as the violence perpetrated by their own family members to save their 'honour'. It was easier for men to get rehabilitated but it was difficult for women specially those who had lost their honour. They were rejected by the families and not accepted for marriages.

Further agonising experience for women was the recovery of abducted women by the two states, 50,000 Muslim women in India and 30,000 non-Muslim women in Pakistan. The well-documented experiences of recovery of women by both the governments shows that the women had no entity independent of men or state.

The women were bereft of their fundamental legal right and had no recourse to justice. Those who suffered in violence and then in forcible recovery had similar and durable experiences with haunting memories.

Men also face violence and humiliation in war conflict but they are termed heroes and martyrs. Where as women face violence and humiliation as victims of war and conflicts at the hands of enemy. The humiliation continues when they are made objects of shame by their families and communities reflecting of patriarchal ideology of family, community and state.

The concept of national security with greater use of military in the internal strikes during natural calamities, or breakdown of law and order has resulted in increased role of armed forces in certain parts of India. We witnessed shrinking of political authority in Assam and North - Eastern states, Punjab, J & K and other places at different times.

The neglect of development issues has given a ground for emergence of secessionist movements. The attempts to curb the movements militarily or by co-opting some faction or putting factions against each other as short cut methods has complicated the matters further. The military and militants suffer the losses but the civilians are worst hit. Among them women and children being traumatised the most. The repressive laws like TADA, Terrorist Affected Areas. (Special Courts) Act and present POTA provided the state with unlimited powers.

The women have been suffering in the states in North-East both at the hands of security forces and the extremists. There have been enough studies made with direct testimonies from affected women from the region with gory details to substantiate the claim of womens movement. Sexual harassment including rape during raids at any time of the day or night been widely reported. The instances of prostitution, bribery and abduction are also common. The orders of Supreme Court could also not help village women in Assam or other North - Eastern states to safe-guard themselves from these harassments. The militarisation of the region has been on rise from both the sides. The study conducted by Rashmi Goswami in North - Eastern states puts women in six categories who are affected due to conflicts on their lives. The women who are direct victims of state or militants, the women who loose all their kith and kin from either side or the women from the army families, the women of the families of extremists, the women who become party to militantancy and the women who choose to oppose mindless violence from any side and many others.

In Tripura, the Tribal women do a major part of the work in jhum (shifting) cultivation. This is often deep in the jungle where the women work in groups. In one instance the extremists attacked a group of women engaged in jhum cultivation and killed two of them because they refused to give up their sympathies with a party strong in the area. Terrorists come to the huts of poor tribals in the night and forced the women to give them food threatening them with arms. The women who sometimes have barely enough to eat themselves are forced to give the

food. Often the extremists take away the few chickens or goats the tribals may have. There have been occasions when the following day the security forces come to the area and accuse the women of sheltering the extremists. Thus they are caught between the two sides.

Extremist attacks have led to the death of scores of women and children apart from the targeting of tribal activists of democratic organisations. Shanti Deb Burma a tribal activist of a women's organisation was picked up from her house in the middle of a winter night and made to stand in a cold water pond for five hours in punishment for her joining a women's demonstration against terrorism and for peace. Another elected woman, tribal activist who was the chairperson of the panchayat threatened with violence if she continued to work. Another tribal woman, an MLA was forced to leave her constituency under threat. She was also under pressure from her family to stop her political work.

Tribal militants are also encouraging polygamy among tribals saying that this is the best way to increase the tribal population. Tribal men and women are warned against using contraception. Naturally this adversely affects the status of tribal women.

The families of those killed are living testimonies to the inhuman treatment at the hands of extremist groups.

In the words of Hambro Musahari *"I said where is he, where is my 12 year old son? He went to school this morning. Why has he not returned home... I saw the extremists. They could not forgive me for not supporting their activities. His ear and nose had been cut off - he was my child, my flesh, my blood. I live and yet I am dead."*

In another example Reena Basak a courageous woman sarpanch from Barpeta refused to sign a false bill of Rs. 20,000 given by extremists despite being threatened that she would suffer. A fortnight later they returned and killed her husband. They said "we will not kill you, for your fear then would end. We will kill your husband so that with every breath you take you will remember our words." Even today this courageous

woman does her work as an elected representative of the people. But she paid heavy price. She cannot ever leave her son alone for fear that he will be harmed and the child grows up in this terrible insecurity.

Manipur and Nagaland have witnessed extreme repression by state agencies in the prolonged efforts to contain extremist activities in these two states. It is women in many areas who patrol the neighbourhood at night for protection against both the security forces and the extremists. One call of the patrollers and hundreds of women gather in protection. But women complain of lack of sleep, increased anxiety levels and tension related stomach ailments. The voice from women in North-Eastern India is same "As women we say enough of this bloodshed - we want food, we want peace, we want to live."

In the state of Punjab the rise of Khalistani movement had all the elements of patriarchy and hierarchy with cultural dictates against women. In Punjab also, as in other states mentioned earlier, the terrorists issued orders for a social code of conduct which included decree that a Sikh woman did not have the right to divorce or the right to property. A dress code was sought to be enforced and young women were warned only to wear salwar kameez and to keep their heads covered. Women wearing jeans were attacked by the students wing of the terrorist groups. Human rights abuse took place from both the sides but the women suffered immensely at the hands of extremists. The women of the families who willingly or by force were obliging the extremists or the women who joined their ranks had horrendous tales to narrate during various enquiries and interviews. The victims were not taken care of appropriately by the state in the peace time and rehabilitation continues to be a big issue.

Although the terrorist activities in Punjab have subsided, the trauma and tragedy of thousands of families who lost their loved ones remains as permanent scars. Yet even at the height of terrorism and the worst provocations of the terrorists, there were no community based mob attacks or rioting. A memorable comment in an interview of a woman Rani Kanwal recorded by a journalist during those days was "You tell me whether I am

Hindu or Sikh. My husband is a Hindu, but my mother-in-law is a Sikh. One of my brothers is a Hindu, the other is a Sikh. My brother in law is a Hindu, but my mother's brother in law is a Sikh. We never ask who is a Hindu or a Sikh. Only for the last three years politicians and newspapers have been forcing this question on us." Rani was speaking not just for herself but for numerous Punjabi families.

The State of Jammu & Kashmir continues to bleed till date. 150,000 Kashmiri Hindu evacuated from the valley in 1990. Large number of muslims also migrated from the valley. Kashmiris have paid huge price for the continued conflict. Community health suffered due to militancy and counter militancy by state. There are increased cases of psychological disorders. Immunisation, nutrition material and child health programmes were abandoned in many areas due to lack of staff or curfew situation. Many of the hospitals also suffer functioning due to lack of staff and fear of security. Infant mortality is high and schools are badly affected due to poverty as well as conflicts. The orphans in the valley are estimated between 10,000 to 20,000. Militarisation has taken its toll. The women face humiliations during search operations. The cases of rapes and gendered harassment have been reported. The widows face extreme emotional stress, denial of inheritance and sexual harassment and social ostracism both material and emotional consequences are challenges to these women.

Once again we face the stark reality that women are used to promote the militarist strategies by giving their sons and men into the extremist movements. But women fear from both the sides as is typical of conflict situations. The Islamic fundamentalists decree against the movements of women into restaurants, hotels, parks etc. and they are supposed to wear burqas or face bullets or acid attacks.

The recorded testimonies in the state speak for the continued sufferings of women and children. To quote a few :

Baramulla April, 1999: *'They thought I too was dead'* Fifteen year old Mumtaz *"There were three men. They broke the door open and came into our house in Kiterdagchi (a village in*

Baramulla district)," "I have never seen them before. They all had guns... no, they did not have masks. They came when father was preparing for namaaz..." Mumtaz's sister, 14 year old Taira, sits with her head bowed. She can't even bear to think of the incident. The militants didn't waste time. The father, the two uncles and aunt fell to their bullets. Taira too received one in her leg. "They fell on me", Mumtaz says, "The militants thought I too was dead." After the killers left, a blood - splattered Mumtaz got up. The elders were dead and her sister was bleeding. She bound Taira's leg with a cloth and waited through the night in that house of death. The police arrived only the next morning. Now the sisters stay with family friend.

Doda June 19, 1998 : "The wedding was over. The marriage party, with bride Leela in a palanquin, was on its way back. They stopped at Champnair in Jammu province. A bus was to take them to Prem Nagar. The bus didn't come, but a white Maruti did. From it stepped five bearded men, guns in hand," Ghulam narrates, "They snatched gold and money from the women. Leela didn't resist. She parted with her ornaments. Kirna, whom Leela's brother Sheesh Ram had married just two days earlier, followed suit. Next, the assailants wanted the Hindu men to stand apart. Thirty-nine men separated from the group. What followed was massacre... Twenty - four men died that day. And two newlyweds became widows." Ghulam saw bodies all over. "The injured were crying for help," he recollects.

Religious fundamentalist, reinforced by every new atrocity, impacts on the women in very adverse ways. Not only has it circumscribed their lives but fundamentalist women's organisations like the Dukhtaran - E-Millat have been formed that are imposing an Islamic code that was hitherto unknown in the Valley. The Sufi-inspired liberal practices of the Kashmiris which gave the women more freedom and autonomy than their counterparts in many Islamic societies, has been all but completely replaced by a new fundamentalist rigidity.

In the words of Cynthia Enloe, "When a community's politicized sense of its own identity becomes threaded through with pressures for its men to take up arms, for its women to loyally

support brothers, husbands, sons and lovers to become soldiers, it needs explaining. How were the pressures mounted? What does militarisation mean for women's and men's relationship to each other? What happens when some women resist those pressures?"

With the NDA government with BJP, a Hindu nationalist party as leader of the Coalition coming to power since 1998, the militarisation of both the state and society has been a predominant phenomenon. The Rashtriya Swayam Sevak Sangh (RSS), Vishav Hindu Parishad (VHP), Bajrang Dal and other outfits called as Sangh Parivar, the mass organisations of BJP, alongwith Shiv Sena as another fanatic group are militarists and chauvinists in their ideology and practise and re-inforce their agenda in power structures. The culmination of hatred propaganda has been leading to communal riots and conflicts many a times in different parts of our country. The post Babri mosque demolition, there were wide spread riots and women were victimised. The genocide in Gujarat post Godhra surpassed the riots and the politics of hatred against muslim minorities brought hell to women and young girls, gang raped and several of them killed after mutilation.

The Rightist forces have become more organised and gained ground politically. They have tried to implement (with a fair amount of success) a majoritarian Hindu agenda in India in which religious, minorities and those on the margins of society, such as women, have only a limited and strictly circumscribed space. They seek to right certain so-called historical wrongs (such as invasions and conversions by Islam, conversions by Christianity, the rape of its women by members of the 'other' religion) that have 'hurt' the sentiments of its people. It is these people, hitherto quiet and tolerant who are now said to be rising up to confront the enemy who is not so much the outsider as the enemy within.

Nasir Khan Rahim Khan Pathan, Principal, Sunflower School, interviewed at Shah Alam Relief Camp on March 22, 2002 narrated: *"I was an eyewitness to the shameful rape of Khairunnisa, daughter of Mahrukh Bano. It was an animal-like*

mob of 11 who gang raped her. I was hiding in the toilet of my house at that time. After this, they burnt the entire family alive, one by one. The head of Khairunnisa's mother was cut off. I saw them mixing some solvent in the petrol. The bodies found later were in a horrifying condition...

...I saw with my own eyes, petrol being poured into the mouth of 6 year old Imran. A lit matchstick was then thrown into his mouth and he just blasted apart...

...I saw as many as 120 person burnt alive and had the misfortune of witnessing four rapes. Besides, 5-10 young girls were whisked away to God knows where."

Amina Aapa interviewed at Relief Camp on March 22, 2002: "There is not a single woman resident of Hussain Nagar whose dignity was left intact. They were all raped, cut to pieces and burnt. Hamaree aurton aur bachchon ke antim sanskar ke kabil bhi na rakha. Mai aap ko puchti hun, ye zameen kiske liye hai. Ky Musalamanon ka haath Hindustan ki azadi ki ladai mein nahin tha? (Our women and children were denied even the possibility of a decent burial. Tell me, to whom does this land belong? Have Muslims not played a part in the freedom struggle?)

In seconds, using our own gas cylinders, they blasted apart our lives. Hamare log jal kar kabaab ban gaye. Chat se sab kaam hua. (Our people were reduced to grilled meat in seconds. It was all over in a flash.)

The only thing that saved some of us was that they did not come to the terrace where we were hiding."

The assaults on nuns in Haryana, Madhya Pradesh in Orissa and Gujrat & other places have also been reported and documented and all these crimes were committed in order to teach and tame the people of 'other', who in the eyes of the fundamentalists in this case are 'aliens'.

The women have been drawn into the designs of the fundamentalists and communalists more nakedly and aggressively.

One could look into the findings of the investigating teams into various communal riots at different times.

The team which had enquired into the Bhagalpur riots had noted the following : *"Our team learned that women of the attacking community had not only helped their men by providing back-up service - breaking down houses, helping to wash away the blood of those killed - but they had also prevented other women from giving help and succour to other victims, principally women and children."*

Two years later in 1992, during the destruction of a 300- year old mosque (Babri Masjid) by hordes of Hindu communalists the voice that gave the impetus to the hordes, to break the building down, was that of woman, Sadhvi Rithambara. In the ensuing violence, women once again played a key role. In Bombay, which was the scene of terrible rioting for days on, women of the Shiv Sena, a Fundamentalist Party, participated in large numbers. They blocked roads to stop police from arresting their leaders and prevented fire engines from getting to burning Muslim homes. They assaulted women of the other community and even indulged in arson and looting as well in some places.

The report submitted by a investigating team of women organisations made the following observations *"Women of both communities have been deeply affected. The articulation of their feelings by widows or mothers who have lost their sons/husbands was in the common language of grief, whether they were Hindu or Muslim. The insecurity, the fear is also common... Attacks on women, including sexual atrocities - stripping, rape and burning, verbal abuse, etc. - took place more on women from the minority community."*

The participation of women in violence was deliberate, planned, and therefore all the more dangerous. Tanika Sarkar a historian points out in a perceptive essay, that the Rashtriya Swayamesvika Samiti, the women's wing of the right wing had, in the 1990s, taken the clear decision that women should join in the attacks on the Babri mosque.

As she puts : *"They [the Samiti] had proudly pointed out the Samiti's icon of the eight-armed Durga, carrying weapons. They had recited the Samiti mantra which exhorted them to lay down their lives in the service of the nation - and said that it was a*

literal call to war for the sevikas. They had explained that this was to be a 'civil war' against 'the enemies within.' This urge for violence, destruction, revenge, for trampling over Muslims and Christians is, if anything, more strident today."

This was once again got replicated in Gujrat genocide after heinous act of Godhra. In this case the women were reportedly prompting the men of their families to perpetrate crimes against women.

Activist Flavia Agnes makes the following observations in one of her articles: "The image of the modern Hindu woman which was constructed while advocating the communal Hindu ideology was not that of a traditional subservient and docile domestic being but a new modern Durga, the destroyer of evil, an angry and rebellious woman. This construction of the modern Hindu woman closely resembled the Indian construction of the new 'feminist' women. This new woman could come out on the street from the community to avenge their wrongs with as much ease as the men could. And in this action, she had the blessings of the party and community leaders. Hence women found this role not only exciting but also more comfortable than one which involved protesting against a violent husband or a rapist from within the community. In this latter role, they would not have the protective mantle of the party nor the blessings of community elders."

The women's movement faces a new challenge in the involvement of women in conflicts whether it is conflict between different religious communities, or between classes, or indeed between security forces and sub - nationalist movements or insurgents.

Nevertheless whatever are the challenges, they must be met. The women have to play their role for peace freedom and development, for justice and equality as they have all the stake in it.

AGRICULTURE AS WAR

Dr. Vandana Shiva

In food systems, this destructive power arising from fear finds expression in pesticides and factory farms, in Terminator seeds and GMOs, in patents on life and biopiracy, in the unfree rules of free trade, in NAFTA and W.T.O., in global gene giants like Monsanto and Syngenta and global grain giants like Cargill, ADM and Con Agra.

Our agriculture and food systems are being increasingly taken over by destructive power. Agriculture has become a domain of war.

At a time when we are faced with imminent war justified on grounds of destroying weapons of mass destruction, it is sobering to recognize that our farms and food systems increasingly use weapons of mass destruction.

Violence was part of the very context of discovery of pesticides during World War I. The manufacture of explosives had a direct spin-off effect on the development of synthetic insecticides. The tear gas, chloropicrin, was found to be insecticidal in 1916 and thus changed from a wartime product to a peace time one. DDT's discovery was the culmination of a research effort motivated purely by commercial concerns, but the compound's adoption was inextricably enmeshed in the politics of war. Pesticides were born as 'devastating weapons in man's war against his own kind'. Organophosphates, of which parathion and malathion are the most widely used, are aimed at destroying the nervous system, 'whether the victim is an insect or a warm-blooded animal.'¹

The context for the creation of pesticides was war. The metaphor for pesticide use in agriculture was also war. This is how the introduction to a textbook on pest-management reads:

The war against pests is a continuing one that man must fight to ensure his survival. Pests (in particular insects) are our major competitors on earth and for the hundreds of thousands of years of our existence they have kept our numbers low and, on occasions, have threatened extinction. Throughout the ages man has lived at a bare subsistence level because of the onslaught of pests and the diseases they carry. It is only in comparatively recent times that this picture has begun to alter as, in certain parts of the world, we have gradually gained the upper hand over pests.

The war story described some of the battles that have been fought and the continuing guerilla warfare, the type of enemies we are facing and some of their manoeuvres for survival; the weapons we have at our command ranging from the rather crude ones of the 'bow and arrow' age of pest control to the sophisticated weapons of the present day, including a look into the future of some 'secret weapons' that are in the trial stages; the gains that have been made; and some of the devastation which is a concomitant of war.²

But the 'war' with pests is unnecessary. The most effective pest control mechanism is built into the ecology of crops, partly by ensuring balanced pest-predator relationships through crop diversity and partly by building up resistance in plants. Organic manuring is now being shown to be critical to such a building up of resistance; women have thus been invisible plant protectors through their work in organic manuring.

Reductionism fails to see the ecology of pests as well as that of pesticides because it is based on invisible, subtle balances within the plant and its environment. It, therefore, simplistically reduces the management of pests to the violent business of war with poisons. It also fails to recognise that pests have natural enemies with the unique property of regulating pest populations. In De Bach's view, "the philosophy of pest control by chemicals has been to achieve the highest kill possible, and per cent mortality has been the main yardstick in the early screening of new chemicals in the lab. Such an objective, the highest kill possible, combined with ignorance of or disregard for, on-

target insects and mites is guaranteed to be the quickest road to upsets, resurgences and the development of resistance to pesticides.³

De Bach's research on DDT-induced pest increase showed that these increases could be anywhere from thirty-six fold to over twelve hundred fold. The aggravation of the problem is directly related to the violence unleashed on the *natural* enemies of pests. Reductionism, which fails to perceive the natural balance, also fails to anticipate and predict what will happen when that balance is disturbed.

Pesticides, the weapons of mass destruction killed 8000 people in the three days in Bhopal on December 2, 1984 following leak in the Union Carbide plant. Thirty thousand people have died since then.

Even the synthetic fertilizers are rooted in war. As Albert Howard wrote in the Agriculture Testament,

The factories engaged during the Great War in the fixation of atmospheric nitrogen for the manufacture of explosives had to find other markets, the use of nitrogenous fertilizers in agriculture increased, until today the majority of farmers and market gardeners base their manurial programme on the cheapest forms of nitrogen (N), phosphorus (P), and potassium (K) on the market what may be conveniently described as the NPK mentality dominates farming alike in the experimental stations and the countryside. Vested interests, entrenched in time of national emergency, have gained a stranglehold.⁴

Agent Orange used as a war chemical in the Vietnam war is regularly used as a herbicide in agriculture. Agriculture has become a site of warfare in the methods used, but also in the outcomes. I wrote "The Violence of Green Revolution" nearly 20 years ago. The Green Revolution was the name given to industrial agriculture when it was introduced in the Third World. Norman Borlaug, its founder, was given a Nobel Prize for Peace in 1970. However, in Punjab, instead of peace, it had left the legacy of war which took 30,000 lives.

In the 1980s, Punjab farmers took to arms. Today, they commit suicide. More than 20,000 farmers have committed suicide in India over the last few years by consuming pesticides to escape debts caused by costly seeds and chemicals.

Even the most prosperous agricultural society, the U.S. had had its share of violence. The Oklahoma Bombing was connected to the farm crisis, as documented in detail in "The Harvest of Rage".

New forms of violence are now emerging with genetic engineering. Herbicide resistant crops are increasing the use of herbicides and creating super weeds. Bt. toxin crops are destroying a safe organic option and creating super pests and toxic food.

This violence is unnecessary. Non-violent ways of controlling pests have always existed. As Howard noted half a century ago, 'Nature has never found it necessary to design the equivalent of the spraying machine and the poison spray for the control of insect and fungus pests. It is true that all kinds of diseases are to be found here and there among the plants and animals of the forest, but these never assume large proportions. The principle followed is that plants and animals can very well protect themselves even when such things as parasites are to be found in their midst. Nature's rule in these matters is to live and let live'.⁵ Howard believed that the cultivators of the east had a lot to teach the western expert about disease and pest control and to get western reductionism out of the vicious and violent circle of 'discovering more and more new pests and devising more and more poison sprays to destroy them'. When Howard came to Pusa in 1905 as the Imperial Economic Botanist to the Government of India, he found that crop grown by cultivators in the neighbourhood of Pusa were free of pests and needed no insecticides and fungicides.

I decided that I could not do better than watch the operations of these peasants and acquire their traditional knowledge as rapidly as possible. For the time being, therefore, I regarded them as my professors of agriculture. Another group of instructors

were obviously the insects and fungi themselves. The methods of the cultivators, if followed, would result in crops practically free from disease, the insects and fungi would be useful for pointing out unsuitable varieties and methods of farming inappropriate to the locality.⁵

At the end of five years of tuition under his new professors — ‘the peasants and the pests’ — Howard had learnt

.....how to grow healthy crops, practically free from disease, without the slightest help from mycologists, entomologists, bacteriologists, agricultural chemists, statisticians, clearing-houses / of information, artificial manures, spraying machines, insecticides, fungicides, germicides, and all the other expensive paraphernalia of the modern experiment station.⁶

Howard could teach the world sustainable farming because he had the humility to learn it first from practising peasants and nature herself. He found that the most effective way to control pests is the non-violent method based on the feminine principle, by building pest resistance in the plant, rather than by attacking pests. ‘Nature has provided a marvellous piece of machinery for conferring disease resistance on the crop. This machinery is only active in soil rich in humus; it is inactive or absent in infertile land and in similar soils manured with chemicals. A feminine, non-violent perspective on agriculture would thus need to take organic manuring, largely carried out by women, as work in pest management and plant protection while contributing to soil fertility and soil moisture conservation at the same time.’⁷

We do not need genetically engineered rice for Vit. A. Women have bred red rices rich in Vit. A. and have used greens like Amaranth, fenugreek, mustard, drumstick which yield 1400/Mg/100gm — 70 times more Vit. A than “golden rice”. We do not need protein potato. Our pulses and legumes give 6 to 7 times more protein than GM potatoes can, while giving the soil free nitrogen and conserving moisture.

Violence in agriculture has been justified on grounds of producing more food — but more food is not produced. Ecologi-

cal agriculture has many fold higher output than industrial monocultures.

And as the obesity epidemic in USA shows, industrial food systems do not bring food security even in affluent societies.

There is the new problem of patents. USDA and W.R. Grace patented the use of neem for agriculture. We had the patent revoked after a ten year legal battle. Ricetec, a Texas based company claimed to have “invented” the Basmati, the aromatic rice of my Valley. And now Con Agra, the agro giant has “invented” our “atta” (flour).

The U.S. Patent Office has granted patent rights to ConAgra Inc for the “method for producing an atta flour” vide no. 6,098,905. The patent application filed by ConAgra said, “the present invention relates to a method for producing an atta flour, which is typically used to produce Asian breads such as *chapati* and *roti*. The *atta* flour method includes passing an amount of wheat through a device designed to crack the wheat so as to produce an amount of cracked wheat, following by passing the cracked wheat through at least two smooth rolls designed to grind the cracked wheat into flour, with the smooth roll importantly grinding the wheat to a smaller particle size and shearing the wheat to cause starch damage in the finished atta flour.”

We have to take back power over food and we have to reshape our food systems as systems based on peace and non-violence, not war and violence.

Navdanya, the movement I started fifteen years ago seeks to reestablish a sustainable and just food system. Beginning with the seed we work to bring back biological diversity in our agriculture and cultural diversity in our food systems.

We create alternatives to seed monopolies by sharing and saving seeds. We create alternatives to food scarcity by increasing nutrition per acre through biodiversity. We create alternatives to food hazards by sustaining local, small scale processing in women's hands. We know we have the power to change paradigms, policies and practice. We are confident the future be-

longs to peaceful power with creative partnerships between nature and people.

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3. De Bach, "Biological Control by Natural Enemies", London: Cambridge University Press, 1974
4. Sir Albert Howard, "An Agricultural Testament", Other India Press and RFSTE, 1996, p18
5. Howard op.cit.
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The only Thing
That's good
About the Nuclear Bomb
is that
It does not discriminate

If we fail to speak up today
Deadly silence we will earn

Every home will be on fire
Every dwelling we'll see burn

From beyond the silence then
A cry of anguish will return

There's no one here
No one at all

No one.



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Courtesy : Voices of Sanity



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